

# CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

PHARMACY update  
MULTIPLE CHOICE QUESTIONS

8 June 1996

## Sharpe appeal hearing next week

## Call for prescription intervention pay

## Birmingham gains accreditation scheme

## The sun shines on St Albans for NPA



## AESGP: teleshopping threat to pharmacy

## Business in focus: three Davids and a Goliath

## Addis sells Wisdom in management buyout

Online at <http://www.dotpharmacy.com/>



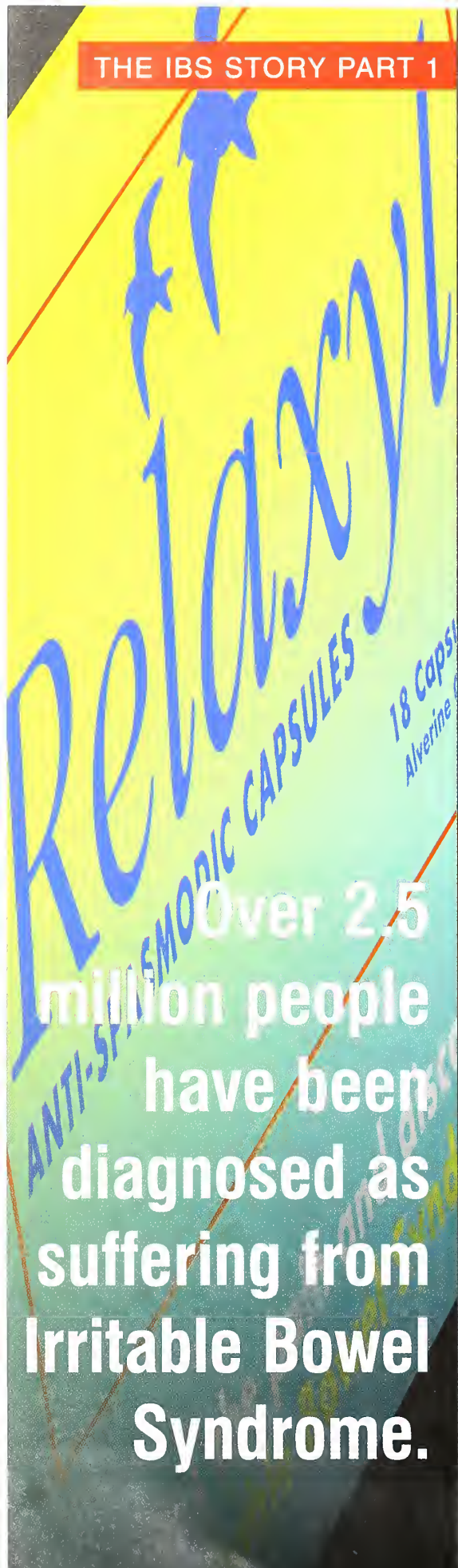
For the second year running,  
Sudocrem is proud to accept  
the Mother & Baby Gold Award  
for Product Excellence\*

\*Skincare category

Sudocrem Antiseptic Healing Cream. Product information. Presentation: A white emulsified cream containing as active ingredients Zinc Oxide Ph Eur 15.25%, Lanolin (Hypo-allergenic) 4%, Benzyl Benzoate BP 1.01%, Benzyl Alcohol BP 0.39%, Benzyl Cinnamate 0.15%. Uses: In the treatment of napkin rash, bedsores, minor burns, eczema, acne, chilblains, surface wounds and sunburn. Dosage and administration: To be applied in a thin layer over the affected area with suitable covering, where necessary. Renew application as required. Contra-indications: None. Warnings: Keep out of the eyes. Legal Category: GSL. Retail price ex VAT: 60g £1.18, 125g £1.95, 250g £3.48, 400g £5.10. Further information: Nil. Product Licence Holder and Number: Tosara Products Ltd 3430/0001. Sudocrem and Tosara are registered trade marks. Revised May 1996. Pharmax Healthcare, Bourne Road, Bexley, Kent DA5 1NX.







Over 2.5 million people have been diagnosed as suffering from Irritable Bowel Syndrome.

**PRODUCT INFORMATION - RELAXYL.** Presentation: Buff /green hard gelatin capsule for oral administration. Each capsule contains 60mg alverine citrate. **Uses:** Relaxyl is indicated for the relief of smooth muscle spasm of the gastro-intestinal tract in irritable bowel syndrome. **Dosage:** Adults, the elderly and children 12 years and over: 1 or 2 capsules, one to three times daily. Not recommended for children under 12 years of age. **Contraindications:** Cases of paralytic ileus or hypersensitivity to any of the ingredients.

**Over 2.5 million people have been diagnosed as suffering from Irritable Bowel Syndrome.**

**Alverine citrate, the active ingredient in Relaxyl,\* has been successfully prescribed for the pain of IBS for over 30 years. Now, with the launch of the first alverine citrate-based OTC treatment, what are the implications and the opportunities for pharmacy?**

IBS is one of the most common digestive disorders in Britain, but awareness of the condition has only recently begun to rise. As a consequence of a better understanding of IBS, people no longer suffer in silence.

### **Alverine Citrate - The first dedicated OTC treatment for painful IBS**

Whilst there have, until the launch of **Relaxyl**\*, been no dedicated OTC treatments for IBS, doctors have been prescribing alverine citrate for over 30 years. A powerful anti-spasmodic, alverine citrate works by relaxing the painful muscle spasms in the lower bowel. Clinically proven and well tolerated, it enjoys an excellent safety profile.

### **Relaxyl - The first choice OTC treatment**

Now, the benefits of alverine citrate are available as a dedicated OTC brand, **Relaxyl**, from Whitehall Laboratories. Fuelled by **Relaxyl**'s sensitive, but plain-speaking advertising and promotion, and encouraged by a growing general awareness of IBS, diagnosed sufferers now know what to do to 'stop the spasms that start the pain'. They're asking their pharmacist about **Relaxyl**.

### **A positive outlook for Relaxyl - A significant opportunity for pharmacy**

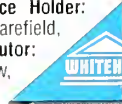


\*Trade Mark

Contains alverine citrate

**Interactions:** None. **Special Warnings:** If symptoms persist or worsen, consult your doctor. **Side effects:** Possible side effects may include nausea, headache, dizziness, itching, rash and allergic reaction. **Effect on ability to drive and use machines:** None. **Incompatibilities:** None. **Use during pregnancy and lactation:** No teratogenic effects have been reported, but caution should be exercised during the first trimester of pregnancy. **Overdosage:** Hypotension and atropine like toxic effects.

**Pharmaceutical precautions:** Store in a dry place below 25°C. **Legal category:** Pharmacy. **Package quantities and prices (ex VAT):** 18 capsules, £3.70. **Product Licence No:** PL0322/0072. **Date of Preparation:** April 1995. **Shelf life:** 3 years. **Product Licence Holder:** Norgine Ltd., Moorhall Road, Harefield, Middlesex, UB9 6NS. **Distributor:** Whitehall Laboratories Limited, Taplow, Maidenhead, Berkshire, SL6 0PH.





Rural frictions between pharmacists and GPs drag on, with another judicial review on the way (p785). The situation is getting ridiculously out of hand and there is no resolution in sight. Dispensing doctors have so far failed in their challenges to the Clothier 'loophole', but continue to exploit the market town scenario. Last autumn, it looked as if health minister Gerald Malone, having met with both sides, would bang heads together to broker a deal. Eight months on and disputes are still trundling through the courts. Is the minister really happy to sit back and watch this steady erosion of inter-professional relations?

The PSNC's assistant secretary, Mike King, seems to think a solution might come soon. But the ensuing deal may not be to everyone's liking. PSNC wants legislation to prevent doctors in the centre of towns well served, with pharmacies being granted the right to dispense for those living in the rural hinterland. Dispensing doctors want to close the Clothier loophole. Another option, proposed by NPA director Tim Astill, would see the 'dispensing limit' increased to five kilometres (as is the case in Northern Ireland) in exchange for closing the loophole.

The pharmacy side is prepared to make concessions. But will doctors be as conciliatory? If the rhetoric from the Dispensing Doctors' Association is an indicator, the chances are slim. It is the doctors who regularly stir up local opposition to pharmacies, and it is the doctors who seem to believe that the courts will finally give them what they want, without having to make any concessions. But it's an expensive way of achieving something which may be better addressed by a less extreme approach. Both sides need to take stock of the situation and determining what is important – not for their own individual situation, but for the needs of the people they both serve: the patients.

## CHEMIST & DRUGGIST

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Chemist & Druggist incorporating Retail  
 Chemist & Pharmacy Update

Published Saturdays by  
 Miller Freeman Professional Ltd  
 Sovereign Way, Tonbridge, Kent TN9 1RW  
 Telephone 01732 364422  
 Telex 95132 MILFRE G  
 Fax 01732 361534  
 E-Mail chemdrug@dotpharmacy.com  
 Internet site  
 http://www.dotpharmacy.com/

Subscriptions Home £115 per annum  
 Overseas & Eire £165 per annum  
 including postage  
 £2 40 per copy (postage extra)

Circulation and subscription: Royal  
 Sovereign House, Beresford Street,  
 London SE18 6BQ Tel: 0181 855 7777

Refunds on cancelled subscriptions will  
 only be provided at the publisher's  
 discretion, unless specifically  
 guaranteed within the terms of  
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 A United News & Media publication



# CHEMIST & DRUGGIST

THE NEWSWEEKLY FOR PHARMACY

VOLUME 246 No 6038 136th YEAR OF PUBLICATION ISSN 0009-3033

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# Sharpe appeal next week

The South Wales' pharmacist who was disciplined for dispensing National Health prescriptions privately will have his appeal heard next week.

Allan Sharpe, of Newbridge, has the backing of the National Pharmaceutical Association, which will argue his case.

In 1995, Mr Sharpe was fined \$550 by the Mid-Glamorgan Family Health Services Authority after it ruled that he was in

breach of his NHS contract by dispensing drugs privately for less than the prescription fee.

Mr Sharpe feels there will be no overturning of the FHS's decision that he was guilty of breaching regulation 3(1) of his Terms of Service. "A schoolboy looking at the regulation they accuse me of breaching would see that it is irrelevant," comments Mr Sharpe.

His appeal's underlying aim

concerns the rights of the pharmacist and the patient being under attack by the NHS, "which is primarily there to pay for things, not to determine how things are done".

His solicitor intends presenting a simple case, he said.

● A survey of 100 GPs in the *BMA News Review* reveals that more than three-quarters want pharmacists to follow Mr Sharpe's stance.

## Listening tour report next week

The Department of Health will publish the results of health minister Gerald Malone's nationwide 'listening tour' on the future of primary care next week.

DofH insiders say the paper will set out an enhanced role in the NHS for non-medical staff, including pharmacists.

"This is something we have been trying to do for several years, but the paper will take the policy forward," says one senior official.

## Indecent assault leads to striking off

A pharmacist convicted of eight counts of indecent assault involving four young boys has been struck off by the Statutory Committee of the Pharmaceutical Society of Northern Ireland.

The Committee heard that Desmond William Dunwoody of Clonvara, Jordanstown, Newtonabbey, was given a 12-month suspended jail term after pleading guilty to the offences at Belfast Crown Court last November.

Robert Miller QC, for the Committee, said Dunwoody, a 40-year-old bachelor, had operated a pharmacy from premises in Rathcoole on the outskirts of Belfast. The offences occurred between December, 1993, and March, 1995, at three locations, including the Rathcoole premises.

Mr Dunwoody did not appear at the hearing and his lawyer, Nigel Martin QC, said it was his client's instructions that he should not oppose any application striking his name from the Register.

Mr Martin said that while the offences involving the boys, the youngest of which was just six, took place over a lengthy period, they did not go beyond "inappropriate touching".

It was revealed that Mr Dunwoody had been attending a therapy programme at the Alderwood Centre in Belfast. The assessment was that he would complete the course successfully and the likelihood of re-offending would be minimal.

Mr Martin said Mr Dunwoody had paid a very high personal price. He had lost his business and career, and been vilified in the press. "He is very much a marked man."

His premises had twice been attacked and there had been threats to his safety which led police to take steps to protect him.

## Pharmacists become 'Activators' to fight fat

A group of pharmacists is to help fight the nation's increasing propensity for sloth and obesity.

In an attempt to meet the Health of the Nation targets, the pharmacists from 11 Buckinghamshire pharmacies will form one of ten groups taking part in the national 'Activator' pilot.

The eight-week campaign aims

to encourage the public to become more physically active and to have a healthy diet. The positive benefits of healthy living will be emphasised in a special 'Activator' magazine and other promotional material.

The pharmacists have been trained in health promotion knowledge and skills by the

pharmacy practice group at King's College, London. The only pharmacy-based group, it was selected by the project's initiator, the Food and Drink Federation, which identified ten of the best and most effective local health promotion efforts across the country.

"Each project is being evaluated by the FDF and the results will guide the development of a national campaign planned for 1997," says the head of the King's College's pharmacy practice group, Claire Anderson.

● The problem of increasing obesity has been blamed on 'passive over-eating' in which food of higher calorific value, but of reduced bulk is eaten. According to a report in *The Independent*, the body does not recognise this increased calorific intake, so there is no reduction in the amount of food consumed.



The Buckinghamshire pharmacists with the 'Activator' magazine

## Report calls for intervention pay

Pharmacists should be remunerated for the additional work they do in clarifying prescriptions before dispensing them.

In her report on a study which details the amount of time pharmacists spend in dealing with this issue, pharmacy audit facilitator for St Helens & Knowsley Judith Whittaker says that while pharmacists are pleased to act as a safety net in clarifying prescriptions, the service is not directly remunerated.

"Pharmacists should be adequately re-imbursed for the hidden, although important, workload involved in dispensing," she says.

Eighteen pharmacists in St Helens & Knowsley recorded 238 serious or major interventions they had to make over three

months, an average of six a month each. The interventions were classed as 'potentially serious' if the prescription would have been dangerous to the patient and 'a major nuisance' if the pharmacist had to contact the prescriber before the prescription could be dispensed. For example, if it was illegible.

Each intervention took an average of seven minutes to resolve and an average of one local phone call. One quarter of the prescriptions were confirmed by the prescriber to be correct as written, but the pharmacist had thought the contact was necessary. Half were changed in accordance with the pharmacist's advice. There were 16 overdoses, some of which were not immediately obvious

but found by the pharmacist's careful vigilance.

Antibiotics were involved in 29 per cent of the serious interventions, a particular problem being interactions with 4-quinolones and macrolides. Antihistamines were responsible for 12 per cent, particularly interactions with terfenadine. At least 56 per cent of the prescriptions requiring intervention were handwritten. Another problem was the lack of children's ages on prescriptions, which in some cases could have led to them being given aspirin or overdoses.

The St Helens & Knowsley Pharmacy Audit Advisory Group, which made the study, collaborated with local doctors to allay any fears that it would be seen as a fault-finding exercise.



## Caldwell the new RPSGB president

Glasgow community pharmacist Ian Caldwell has been elected president of the Royal Pharmaceutical Society for 1996-97.

Formerly vice president, Mr Caldwell has been a member of the Council from 1988-91 and from 1993 to the present. Isle of Man community pharmacist Peter Curphey succeeds him as vice president, with Professor Geoffrey Booth, Bradford, elected treasurer. John Ferguson was re-elected secretary of the Society.

Mr Caldwell succeeds Ann Lewis, who has been appointed joint director of continuing education and professional development at the Centre of Pharmacy Postgraduate Education. She shares the post with Dr Peter Wilson, who is currently attached to the office of the chief pharmacist of the NHS Executive.

Professor Peter Noyce, head of the pharmacy department, says: "We are delighted to attract two such eminent pharmacists to the post in a job-share arrangement."

CPPE will, from August, 1996, be located at Manchester University with the directors joining the executive group of the department of pharmacy.

## Check out Update's May MCQ

This week's issue carries the multiple choice question paper for topics carried in **Pharmacy Update** in May. The three topics under question are:

- beta-blockers (module 14)
- cystitis (module 15)
- palliative drug therapy (module 16).

Pharmacists who wish to have their answers to each **Update** module independently marked and certified can register to use C&D's interactive telephone marking service. The cost is \$12.50 (plus VAT). This will allow access, via a personal identification number, to all College of Pharmacy Practice-accredited modules published during 1996. A faxback service for back copies of accredited articles is available on the premium rate 0891 444791.

This service is supported by Johnson & Johnson MSD Consumer Pharmaceuticals.

## Birmingham pharmacists 'working for excellence'

Birmingham pharmacies can take part in a new accreditation scheme which seeks to develop their role in health promotion. Those accredited will receive a one-off payment of \$400 and be entitled to display a 'Working for excellence in Birmingham' sticker.

Pharmacies must have completed the patient medication record course and five other key objectives.

One requirement obliges pharmacies to have a consultation area, no more than a tenth of window space covered by stickers and advertisements and no confectionery on the medicines counter (other than medicated items). Medicine counter assistants must also be suitably trained.

The pharmacist must have

completed the CPPE health promotion course and a smoking cessation course organised by the health authority, as well as offering two services from an approved list, which includes needle and syringe exchange, welfare milk and prescription collection and delivery.

The scheme is being funded by Birmingham Health Authority, with which interested pharmacists must register by June 30. The local pharmaceutical committee is urging contractors to take part.

"If it is to be successful in its first year and, as a result, give us a more powerful bargaining position when we come to negotiate an extension, we need to ensure as high a level of uptake as possible," the LPC officers say in a letter to contractors.

## Clinical distance course from Bradford

The University of Bradford is currently offering a new postgraduate distance learning course in clinical pharmacy for community pharmacists.

Candidates who successfully complete the first six modules in one or two years will be eligible for a postgraduate certificate. They will then be able to work for a postgraduate diploma by completing a further six modules in one or two years. After this, pharmacists may progress to Master's level which will be a research project tailored to the individual's interest and expertise.

The course will focus on the appropriate sale of medicines and medication reviews. The distance learning material will be linked to assignments and a study day per module. The first six modules will concentrate on gastro-intestinal complaints, pain and skin problems. Further details are available from Professor Henry Chrystyn (tel: 01274 383496; fax 01274 384769).

## Humberside GPs seek judicial review – again



The long-running doctor dispensing saga in Humberside has taken another twist as the GPs seek leave for a third judicial review.

So far, Drs Moore, Marsden and Robinson of the village of Holme-on-Spalding Moor have succeeded in having the then Humberside Family Health Services Authority (now East Riding Health Authority) reconsider granting a pharmacy application to Crump & Watson (C&D December 23/30, 1995, p910). However, the FHSA still found in favour of the pharmacists (C&D February 10, p190). This application will be heard on June 20.

Their argument will attempt to persuade the court that it has the powers to amend badly-drafted regulations, such as the NHS (Pharmaceutical Regulations) 1992, which allows a pharmacist already on the pharmaceutical list to open another pharmacy without prejudice to medical services having to be considered – the so-called Clothier 'loophole'.

The National Pharmaceutical Association has pledged to contribute up to half of Crump & Watson's costs.

Leave for another judicial review on the same matter has been granted for the village of

Madeley, Staffordshire, with the doctors maintaining that the prejudice test listed in regulation 12 should apply in these instances.

● Staffordshire villagers are raising money by collecting boxes and having a whist drive for a judicial review of a pharmacy contract in the village of Gnosall, says the local parish news. Jonathon Mitchell of T C Cornwell, who will be opening the pharmacy in Gnosall, believes that the villagers are too late for a review as three months have passed since the dispensing contract was granted.



# Signalysis pharmacy faces disciplinary hearing

Patients at a Gloucestershire clinic were given doses of their own blood and urine, a disciplinary hearing was told last month.

People suffering headaches, asthma, arthritis and ME were prescribed drops of their own body fluids to drink, rub or inhale as creams or nasal sprays, when they attended a Dorset couple's 'Therapy Centre' in Stroud.

Ken Spelman and his wife, Rosemary, who run Signalysis, in Amberley, face having the premises struck off the pharmaceutical Register for misconduct. Superintendent pharmacist Jasmine Wells, of Theescombe, Amberley, Stroud, is also accused of misconduct.

David Bradley, representing the Royal Pharmaceutical Society, told its Statutory Committee that the clinic was set up in November, 1991, as a registered pharmacy. He said it dealt with Signalysis, or Spagyrik Therapy, where patients submit samples

of blood or urine, which are crystallised and mixed with herbs.

Mr Bradley said the process was widely used by doctors in Germany. Reginald Habel, a qualified doctor who claimed to be an expert in the therapy, said the crystallised urine and blood displays "immune stimulating parts".

Dr Charles, medical adviser to the ME Association, challenged the claims and branded it as "absolute quackery".

The full allegations are that the therapy does not involve supply of products generally understood or accepted as medicinal products; the provisions of Section 10 of the Medicines Act of 1968 do not extend to permit activity which otherwise would be unlawful and which consists of the promotion of products as a therapy when these products are not recognised as efficacious medicinal products and do not consist of, or include, recognised medicinal ingredients.

Also that the association of the practice of Spagyrik Therapy with registered pharmacy premises falsely indicates that it constitutes recognised medical therapy or proven efficacy; potential patients are likely to be influenced by the fact that the products are prepared in a registered pharmacy by or under the supervision of a pharmacist.

And that, unlike other complementary medicinal therapies, it is not accepted as a therapy by the Medicines Control Agency and that the practice of the therapy under the provisions of the Medicines Act 1960 does not constitute proper professional conduct by a pharmacist.

Philip Gainsford, representing Signalysis, claimed it was operating within the law. "There is no abuse here, only bona fide use of the exemption," he said. The hearing will reconvene within three months to hear further medical evidence.

## NSAIDs top GP drug error deaths

Non-steroidal anti-inflammatory drugs are the leading cause of adult deaths due to GP medication blunders.

Out of 25 deaths attributable to medication mistakes over a six-year period, NSAIDs, followed by opiates/analgesics and anti-coagulants, accounted for over half of cases, says a report by the Medical Defence Union.

An analysis of the 790 claims settled by the MDU in this period revealed that the largest proportion, 25 per cent, arose from mis-

takes in prescribing, monitoring or administering drugs.

Steroids were the drugs most commonly implicated, usually through prolonged use or problems arising from injection; followed by antibiotics in patients with a known allergy; contraceptive failure through the wrong depot preparation being administered or failure to inform the user of interactions with other drugs; and the interactions between anti-coagulants and NSAIDs.

## Boots guilty of breach

Boots the Chemists has been found guilty of breaching the Terms of Service regulations by Merton, Sutton & Wandsworth Health Authority.

Boots is understood to have faxed prescriptions from its non-contract, Dog Kennel Hill pharmacy to its Watworth Road branch, which has a contract.

The HA says this is a collection and delivery service, which did not breach section 4(1) of the regulations but did breach section 3(1) regarding reasonable promptness. Boots is considering an appeal.

## Drink problem leads to striking off

An alcoholic pharmacist was handing out potentially dangerous drugs to patients, a disciplinary hearing heard last month.

Vinaykant Bhatt, 43, of Willesden, London, clocked up the worst ever set of alcohol-related convictions seen by the Statutory Committee of the Royal Pharmaceutical Society.

Mr Bhatt, who had been working as a locum, was sentenced to a total of three months imprisonment and was disqualified from driving for five years by Brent

Magistrates Court on July 10, 1995, after pleading guilty to driving a car while unfit through drink, driving with excess alcohol and failing to provide a breath specimen when stopped on four separate occasions in March, 1995.

Committee chairman Gary Flather QC said Mr Bhatt was to be struck off, adding: "There is good reason to believe he was drinking during lunch breaks over a number of years.

"The drink-driving is not by

any means the end of it, because in 1994, there were 11 drink-related offences he was arrested for, with drunk and incapable a regular charge."

In total, between May 26, 1992, and February 5, 1996, Mr Bhatt came to the attention of police on 23 occasions for offences of drink-driving, being drunk and incapable, drunk and disorderly, breaching the peace, driving without due care and attention, failing to provide specimens and breaching a County Court injunction.

## Medicines know-how

A Pharmacy Healthcare Scheme leaflet produced for last year's Pharmacy Week has been re-printed at pharmacists' request. Additional copies of the 'How to take your medicines' leaflet are now available.

## 'NHS Handbook'

The National Association of Health Authorities and Trusts has launched the 1996/97 edition of the 'NHS Handbook'. It is available from NAHAT at £36.95 (members) and £39.95 (non-members). Fax: 0121 414 11120.

## Hayfever eyes

The British Allergy Foundation is launching a Hayfever Eyes Awareness Day on June 11. A tips card for sufferers is available, supported by Fisons from: the Hayfever Eyes Information Service, PO Box 277, High Wycombe, Bucks HP13 7SD.

## Blood pressure drops

The nation's blood pressure is dropping. The mean systolic blood pressure has dropped from 139mm Hg in 1991 to 136mm Hg in 1994, according to the 1994 Health Survey. The Health of the Nation target is 133mm Hg by 2005.

## Rising scripts

The number of prescriptions dispensed has risen from 337.4 million in 1984/5 to 462.2m in 1994/5, an average of 3.7 per cent per year, according to health secretary Gerald Malone in a Commons written answer.

## Rural request

Contractors are asked to let the Pharmaceutical Services Negotiating Committee know of any new applications for doctor dispensing, especially in market towns.

## GHP going live

The Guild of Hospital Pharmacists is going live on the Internet. Dr Paul Grassby, of the GHP, hopes the site will cover the Guild and Whitley Council matters, pay, terms and conditions and professional matters. The site address is: <http://www.netlink.co.uk/users/stmarys>

## Babymilk latest

The European Commission says babies are unlikely to be at risk from the level of phthalates found in British baby milks (*C&D* last week, p753).



## PHARMACIST PEN PORTRAIT

## Atulkumar Patel



● **Qualified** in 1985 after pre-reg at Finstead Chemists in Fulham, London, and graduating from King's College, London.

● **Career** Locumed for Underwoods in London for three years before managing Charnwise Pharmacy in the Barbican. In 1991, he returned to locuming, but decided to get away from the capital four years later "because it was getting too aggressive and there was not much contact with patients". Moved to New Quay in Dyfed, a small Welsh fishing resort whose population shoots up from 1,000 in the winter to 20,000 in the summer. He bought CES & E May, the town's only chemist and renamed it Central Pharmacy.

● **Projects** The shop has a close working relationship with the local surgery and is in the process of moving to new premises which will bring the two even closer geographically. At Charnwise, he was involved in a joint project by Camden & Islington Family Health Services Authority and Surgichem, looking at Nomad services for individual patients. Atulkumar was also one of the founder members of the Pharmacy Support Group, working closely with Royal Pharmaceutical Society Council member Hemant Patel.

● **Committees** Committee member on the PSG and was also on the committee of a local Asian community group in London.

● **Interests** Tennis, travel and "learning to swim to make the most of the sea".

● **Outlook on life** "You will never get anywhere unless you try. You have got to take a chance at things."

● **Pharmacy philosophy** "Service, service and service. You can't do anything without this." However, Atulkumar would still like to see pharmacists being paid appropriately for it with a "fairer slice of the cake between multiples and independents". His disappointment at remuneration deals was the reason behind his support for the PSG – Charnwise closed down soon after he left for exactly that reason.



## New-look SB going down the wrong way

I have now had my second visit from the revamped Smithkline Beecham salesforce and so far I think I preferred the more laid-back approach of its predecessor. The new system reminds me more of the old 'Revlon' method of arrogance, assertiveness and high-pressure salesmanship rolled into one abrasive package.

This last visit comprised a deprecating critical analysis of my self-service merchandising system (I have always had a policy of offering small manufacturers a fair crack of the whip), and an attempt to sell me GSL Hedex Ibuprofen with the promise of £1.7 million of advertising support. It was soon obvious that not only were we not talking on the same wavelength but that our differences over the role of community pharmacy and my marketing strategies were irreconcilable.

I have no desire to actively promote GSL medicines by self-service or to destroy my niche markets by hiding minority products in a drawer. I know I cannot compete head-on with multiples and do not wish to be told how I should emulate their mass-market uniformity. I am happy with my perverse individuality and will not be changing my marketing policies just to suit the monopolistic ambitions of Smithkline Beecham.

# Topical Reflections

SB says its new salesforce is technically superior to the old, and therefore better able to deal with the more specialist nature of the pharmacy market, but that superiority has to be tempered by appreciation of my individuality as a customer. Perhaps my problems are due more to a clash of personality rather than deliberate company policy, but so far I prefer the old, more relaxed approach to being patronised by some young marketing whiz kid with a degree.

## Let's cut out this nonsense!

I assume the new 'PA' endorsement on an FP10 in England and Wales is a blanket authority to say what has been reasonably dispensed, whereas a 'PC' endorsement should only apply to an individually-prescribed item. But the catch, according to the latest National Pharmaceutical Association 'Pink Supplement', is that 'PA' only applies to the new 112 patient packs of Rotacaps and that we will not be paid if these prescriptions are endorsed 'PC'.

What a ridiculous bureaucratic solution and once again a demonstration of the cloud-cuckoo-land approach that Department of Health officials have to the real world. I am a professional person conscientiously providing the best service to my clients, and I take extreme exception to the implication that at every step of the way I am trying to defraud the NHS.

All this nonsense of 'PC', 'PNC' and now 'PA' should be scrapped, and open endorsements accepted for changes to prescriptions which ensure the patient receives the medicine or Drug

Tariff item intended, in reasonable quantities and in accordance with ethical dispensing practice.

All changes should be accompanied by the signature of the supervising pharmacist and that should be sufficient instruction to the Prescription Pricing Authority for accurate reimbursement. What could be more simple, but then I am only a poor community pharmacist trying to do his best under increasing duress!

## How about a bit of help?

When Distaclor MR was first introduced, it was enthusiastically used for a few weeks by some of my local doctors, who then reverted to 250mg capsules. In the past year, Lilly has been successful in its promotion: at last MR is the preferred presentation and my use of 250mg has subsided.

This is understandable as the use of MR aids patient compliance and at the moment is cheaper. However, when the patent for cefaclor expires, the 250mg capsules will be considerably cheaper and, with the pressure to prescribe generically, this position could quickly be reversed. Lilly has now decided to discontinue both pack sizes of 250mg capsules. By the time cefaclor is freely available generically, the MR form will be the only one prescribed and Lilly will still control the market.

Good business for the company, but nowhere in its letter is there any indication of how I am to dispose of my remaining £60 of Distaclor capsules. The company should immediately offer to exchange all unexpired Distaclor capsules 250mg for the MR 375mg formulation.



# SCRIPTspecials

## New hepatitis A vaccine for adults

Avaxim is a new inactivated hepatitis A vaccine for active immunisation of adults and adolescents over 16 years.

Manufacturer Pasteur Mérieux MSD says its advantages over existing hepatitis A vaccines are the small volume (0.5ml) and a rapid protection rate, which makes it useful for travellers presenting late for vaccination.

In trials, 94 per cent of people had protective levels of antibodies after two weeks and 100 per cent after four weeks. Projections from these studies suggest that a booster dose at six months will protect for up to ten years.

The pre-filled syringe has a

shorter and thinner-gauge needle than previously available and a peelable label can be attached directly to the patient's notes.

The side-effect profile is similar to other hepatitis A vaccines, the most frequent adverse reactions being transient local pain, weakness, myalgia/arthritis, headache, gastro-intestinal disorders and mild fever.

Avaxim is recommended for travellers to areas where hepatitis A is endemic – that is anywhere outside northern and western Europe, North America, Australia and New Zealand. Others at risk include health workers, day-care workers, homosex-

ual men and drug abusers. The vaccine is given intramuscularly into the upper arm.

Trials are being carried out to see if Avaxim can be given as the booster if another vaccine was used for the first dose. Other inactivated travel vaccines and immunoglobulin can be injected at the same time, at different sites and not in the same syringe.

The vaccine contains 160 antigen units of inactivated hepatitis A virus per 0.5ml dose. It has a shelf life of two years and must be stored in a refrigerator (one syringe, \$21.60; ten, \$216).

**Pasteur Mérieux MSD Ltd. Tel: 01628 785291.**

## Caverject 10mcg

Pharmacia & Upjohn has introduced a new 10mcg pack of Caverject (alprostadil), which should make dose adjustment easier (basic NHS price £7.70). Another recent introduction to the Caverject range is a compact plastic case with after-use lock for the disposal of used syringes. **Pharmacia & Upjohn Ltd. Tel: 01908 661101.**

## Food supplements

Guidelines recently issued by the Royal Pharmaceutical Society advise pharmacists receiving prescriptions for products available both as licensed medicines and food supplements that they should dispense the licensed product in preference to the food supplement. Because of this, the Department of Health has proposed to give advance notice in the June Drug Tariff that folic acid BP 400mcg will be included in Part VIII (Category C), based on the product Preconceive.

## Correction

Act-HIB DTP, the new four in one childhood vaccine from Pasteur Mérieux, offers protection against H Influenzae type B and not type D as originally stated in the company's news release.

## Smallpox stocks

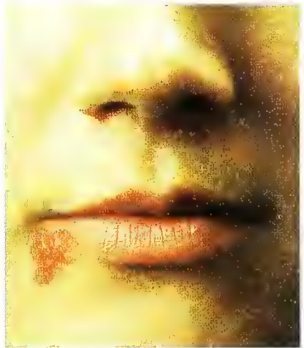
The last remaining stocks of smallpox virus held in research centres in the Russian Federation and the US are to be destroyed in June, 1999. Global eradication of smallpox was declared in 1980 and stocks of the virus have gradually been reduced.

## SB targets cold sores with new antiviral

Vectavir Cold Sore Cream (penciclovir 1 per cent) is a new Prescription Only Medicine indicated for the treatment of herpes labialis.

Manufacturer Smithkline Beecham says the new product is the first topical antiviral to show clinical benefit with either early or late treatment.

Penciclovir has demonstrated *in vivo* and *in vitro* activity against herpes simplex viruses (types 1 and 2). Once inside virus-infected cells, the penciclovir molecule is rapidly converted into a triphosphate, its



active form, which inhibits replication of viral DNA and persists for up to 12 hours.

The blocking of viral DNA synthesis by the drug is highly specific for herpes virus-infected cells.

In clinical studies Vectavir cream was significantly

better than placebo at reducing lesion-associated pain, as well as shortening healing time and duration of viral shedding. It has also been shown to be active against a recently-isolated aciclovir-resistant herpes simplex virus strain.

The recommended frequency

of application in adults (over 16 years of age) and the elderly is at around two-hourly intervals during waking hours. Treatment should be started as early as possible after the first signs of infection and continued for four days.

The cream should only be used on cold sores on the lips and around the mouth. Particular care should be taken to avoid application of the cream in or near the eyes.

As penciclovir is poorly absorbed following oral administration, ingestion of the entire contents of a tube is unlikely to produce any untoward effects, apart from some irritation in the mouth. The basic NHS price for a 2g tube is \$4.20.

**Smithkline Beecham Pharmaceuticals. Tel: 01707 325111.**

## MEDICAL MATTERS

### HELPS leaflet

Many people with bowel problems do not seek the advice and treatment they need for fear of having a rectal examination, according to the Medical Advisory Service. Preparation HELPS, an information service supported by Whitehall Laboratories, has produced a leaflet, entitled 'The Inside Story – Understanding Rectal Examinations'. It explains when an examination may need to be performed, how long it will take and what will happen. Copies of the leaflet are available from Whitehall territory managers or by calling the Preparation HELPSline. Tel: 0181 994 9874.

### Holidaymakers risk health to save money

British holidaymakers would risk catching disease rather than have to pay for travel vaccination, according to a MORI survey of over 2,000 adults.

Three-quarters of those surveyed said they would avoid travel vaccinations altogether if they had to pay for them, and the same number felt travel vaccinations should continue to be provided on the NHS.

However, the perils of travel without appropriate vaccination were not widely appreciated, with as many people saying they were aware of the risks as those who said they were not.

When asked if they were prepared to pay for a full vaccination course (hepatitis A, polio, typhoid and cholera), 87 per cent said they would if it was \$10; 48 per cent if it was \$40; and only 20 per cent if it cost \$140. Sixteen per cent said they would choose a different holiday destination if the cost went beyond a certain price.

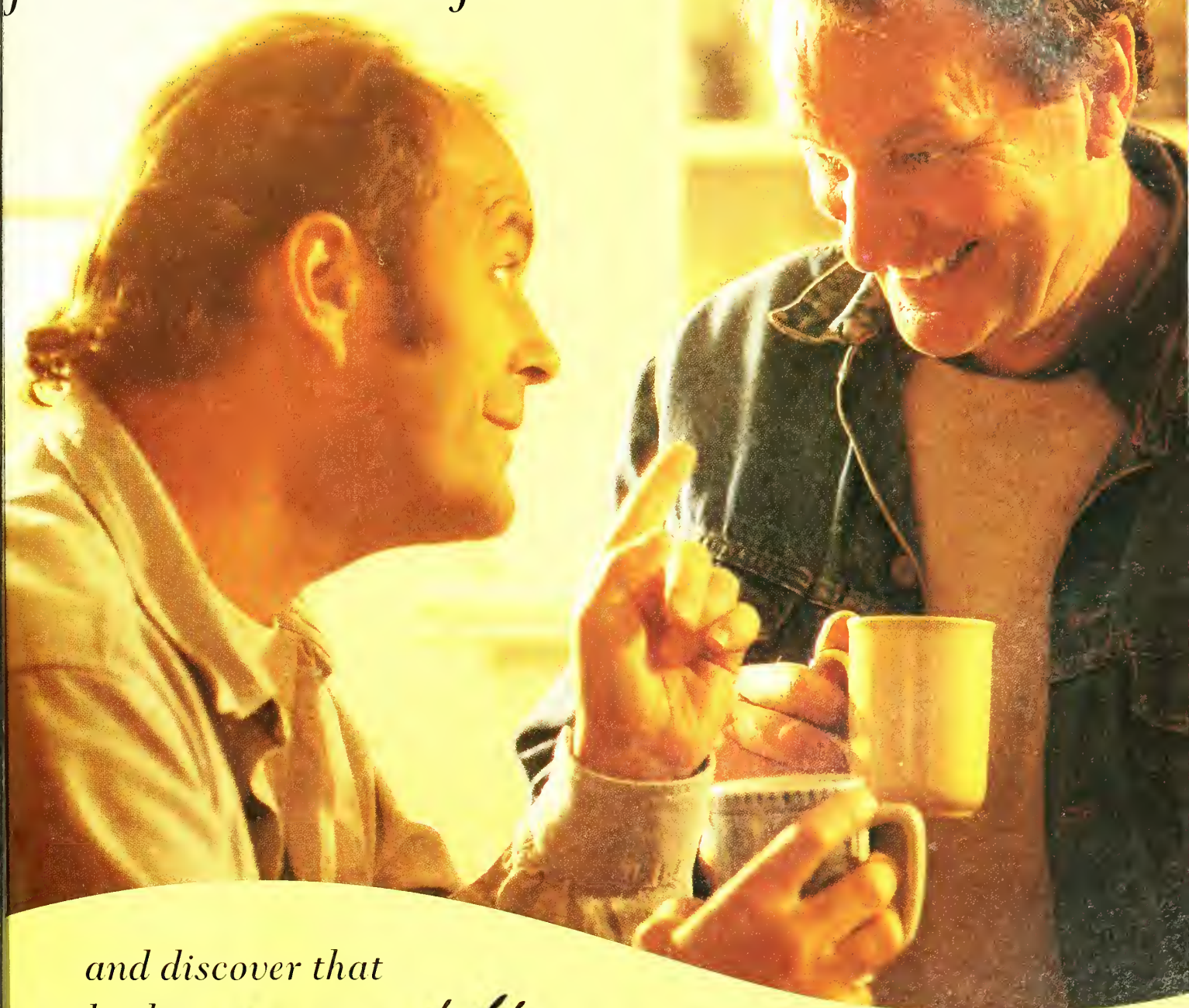
With more than one in ten travellers predicted to visit a high-risk area this year, many GPs fear that this reluctance to pay for vaccines would result in an increase in the prevalence of tropical diseases in the UK.

### Extra cuppas

Two extra cups of tea a day may be all that is needed to help prevent some kidney diseases. This is the central message behind the National Kidney Research Fund's month-long Great British Tea Festival. According to consultant nephrologist Dr John Bradley, dehydration can be a factor in ailments as diverse as headache and constipation, as well as cystitis and more serious kidney infections. Everyone should drink at least ten cups of fluids, such as water, tea or other low-sugar soft drinks, every day, but at the moment the national average is just eight cuppas.



Encourage your  
customers to try  
*Complan*  
for their own benefit...



and discover that  
it also has *positive*  
effects for yourself.

Complan, the complete meal in a drink, has been relaunched. The past 6 months has already seen a sales increase of 8% and Complan continues to dominate the meal replacement market with a 63% share. Now, however, we're unveiling a £1 million relaunch package that includes everything from advertising to consumer promotions. Which means, if you are well stocked up, sales are sure to enjoy an even bigger boost. So next time a customer feels run down, suggest they try Complan. It should do you both the world of good.





# M E D I H E A L T H

**WE'RE HERE  
FOR YOUR  
WELL BEING**



## **NATIONWIDE COVERAGE**

we operate out of four  
distribution centres; London,  
East Midlands, Manchester and  
North East England

## **SERVICE**

we have one of the largest retail  
pharmacy salesforces in the UK,  
supporting all the UK's leading  
community pharmacists

## **CHOICE**

we carry a comprehensive product  
portfolio – imported ethicals, branded  
generics, commodity generics and  
OTC products, including an extensive  
range of Norton and Cox generics

## **PRICE**

our aim is to help  
you increase your profitability and  
enhance your margins by offering a  
wide range of products at  
excellent prices

## **WANT TO FIND OUT MORE ?**

to find out more about our product  
portfolio simply call 0800 525998  
to talk to one of our  
telesales people



M E D I H E A L T H





# COUNTERpoints

## Inter-active display for Allereze

An inter-active counter display unit for the Allereze allergy range has been introduced by Intercare Products.

Designed to sit alongside the pharmacy till, the top half of the unit doubles as a prescription signing pad. It comes complete with an attached prescription signing pen, clip to hold prescriptions, sticky tape dispenser and stapler for sealing prescription bags.

The compact unit also works as an allergy selector – the sufferer inputs their allergy symptoms to receive advice on which product from the Allereze range would best suit their needs.

**Intercare Products Ltd.**  
Tel: 01734 790345.

## Baby accessories are a soft touch for Heinz

Heinz is making its debut in non-food baby products with the launch of Baby Basics – a range of brightly-coloured baby feeding accessories.

This nine-strong line-up makes extensive use of a soft touch Flexisoft plastic material, which is designed to be gentle on the baby's hands and mouth.

The range comes in three segments which are differentiated by the colour of the packaging.

For babies from four months onwards, the four weaning items – bowl, spoons, weaning set and first tumbler – come in mauve pack colours.



Packaged in red, the feeding range for babies from seven months onwards comprises bowl, cutlery, feeding set and three steps trainer cup. A play and splash mat comes in a green pack.

Packaging incorporates a Flexisoft 'touch button' which

allows mothers to 'feel the difference'. Retail prices range from \$1.99-\$5.49.

"A Heinz infant feeding accessories line represents a natural complement to our food business," says Heinz category manager, Mario Salvatori. "The \$23 million weaning/feeding

accessories market is showing healthy growth at 7.5 per cent year on year," he adds.

Heinz's support for the range will include tailor-made promotions in pharmaceutical retail sectors. In-store activity for the launch focuses on Heinz and Farley's baby food. Permanent on-pack couponing features a '\$0.10 off next purchase' of any Heinz/Farley's baby food.

Sampling activity includes a programme in conjunction with two leading nationwide restaurant chains from this month onwards.

**H J Heinz Co Ltd. Tel:**  
0181 848 2193.

## Soft 'n' chewy supplements



Seven Seas has relaunched Berries as new Chewables, with improved flavours and softer, easier to chew shells. The new range comprises Choc-mint Calcium capsules plus vitamin D, Forest Fruits Zinc capsules plus vitamin C, Orange & Grapefruit Iron capsules

plus vitamin C and Black Cherry Vitamin C capsules. Prices range from \$2.75-\$3.39 for 30 capsules.

The range is being supported by educational leaflets, in-store sampling and point of sale material.

**Seven Seas Ltd. Tel: 01482 375234.**

## New micro garlic tablets

Larkhall Green Farm is introducing a new Super Concentrated One-a-Day Garlic supplement to the Cantassium range of micro vitamins and minerals.

This odour-controlled supplement offers the equivalent of more than a whole clove of garlic in

each saccharin-sized tablet.

Packaged in a pocket-sized click pack, it retails at \$3.38 for 60 tablets.

Further additions to the Cantassium Micros range are planned for this autumn.

**Larkhall Green Farm. Tel:**  
0181 874 1130.

## Stronger image for Paramol

Seton Healthcare will be launching a new pack design for Paramol Tablets in July.

It will display the product's ingredients, paracetamol and dihydrocodeine. It also features a distinctive new Paramol logo.

Increased trade and consumer activity is planned for this year.

● Paramol is one of the

fastest-growing strong analgesics in the pharmacy over the counter marketplace (IMS MAT February, 1996).

**Seton**



**Healthcare Group plc.**  
Tel: 0161 654 3000.

## Pharmacy boost for 3M plasters

Free swimsafes and bottles of Cuticura handwash are being offered with 3M Health Care plaster ranges this summer, in a promotion

exclusive to independent pharmacies.

Packs of 45 Comfort Strips plasters are banded with a 50ml bottle of Cuticura Anti-bacterial

handwash. Packs of 45 Active Strips plasters are banded with a swimsafe.

Shelf talkers are provided with all orders of six packs or more from each range. Both products are currently being supported by a consumer sampling programme.

● 3M Health Care Comfort Strips and Active Strips are now sold through Scholl Consumer Products' pharmacy salesforce.

**Scholl Consumer Products Ltd. Tel: 01582 482929.**





# Vichy launches oil-free moisturiser

Vichy has introduced a new lightweight, oil-free moisturiser which is ideal for the summer.

Vichy Thermal S Oil-Free Fluid is designed to provide intensive daily hydration with a matt finish. It combines Vichy thermal spa water and natural moisturising serine.

The product is formulated with the filter Mexoryl SX to protect the skin against short-wave UVA rays (SPF 4).

Vichy recommends this product for sensitive skins.

Packaging is in a 50ml plastic bottle with twist-off cap (\$9.75).

● A novel new deodorant with a sensory applicator has been developed by Vichy.

Deodorant Dermo-Tolerance (\$4.95 for 150ml) has been created to ensure long-lasting deodorant efficiency as well as optimum care for sensitive skin.

The sensory applicator is an aerosol with a soft blue domed top. When pressed into the ampit, the

deodorant formula diffuses through the dome.

The formulation contains a lower concentration of alcohol (52 per cent) than most aerosols, as well as a soothing agent (octoxyglycerin).

**Cosmetique Active (UK) Ltd. Tel: 01235 526747.**



# Cold sore protection from Zovirax

Warner Wellcome is rolling out an extensive summer promotional campaign this month for Zovirax Cold Sore Cream.

Focusing on the theme of 'summer sun' as a major source of cold sores, the campaign includes a pharmacy support package and a nationwide consumer education programme aimed at cold sore sufferers, many of whom are unaware that UV light is one of the key triggers of cold sores.

Set to run until September, the campaign is part of a £7 million support programme for the brand. It includes new POS material, a counter unit containing an eight-page 'Summer Sun' consumer information leaflet; a 'Summer Sun' window card; shelf edgers and display packs of the product.

The leaflet contains advice on

summer cold sore prevention and treatment, and contains a quiz offering customers the chance to win one of 1,000 exclusive 'Z'-branded garden parasols.

The campaign is also backed by an in-store competition offering pharmacists the chance to win a holiday in the Caribbean or Indian Ocean.

Holding 81.2 per cent of the cold sore cream market value, Warner Wellcome expects an increase in usage from the 6.3 million sufferers currently not treating. **Warner Wellcome Consumer Healthcare. Tel: 01495 750049.**

# Small is beautiful for Addiction

Initially launched as a limited edition pack, Elida Fabergé's 20ml bottle of Addiction has now become a permanent addition to the women's variants in the fragrance range.

Comments Jackie Rado, Addiction category trade manager for Elida

Fabergé, "Women, in particular, like smaller-sized bottles because they fit easily in any handbag."

Retailing at £4.95, the 20ml size also

encourages trial among consumers.

**Elida Fabergé. Tel: 0181 481 6000.**



# Johnson's bath time Baby

Johnson's Baby is introducing two new bath time products. Available from July, Breatheasy Bath and Soothing Bath are designed to help unblock nasal congestion and soothe irritated infant skin.

Breatheasy Bath comes in a light green 200ml bottle (rrp \$2.99) and is mild enough for infants from six months upwards.

Combining natural decongestants rosemary, eucalyptus and menthol it helps to relieve babies' blocked nasal passages so they can sleep more easily.

Johnson's Baby Soothing Bath is

and free from preservatives.

Soothing Bath will come in a yellow version of the Johnson's Baby Bath bottle and is available in two sizes: 300ml (rrp \$2.35) and 500ml (\$2.99).

Marketing support totalling over \$1.5 million has been invested in the new products. To begin in late autumn, it will feature Soothing Bath in a national TV

ad campaign and Breatheasy Bath in mother and baby/parenting magazines.

**Johnson & Johnson Ltd. Tel: 01628 822222.**



designed to soothe sore, irritated infant skin. Formulated with camomile, it is mild enough to use on newborns and delicate skin, it is ph-balanced

## ON TV NEXT WEEK

**Andrews:** All areas

**Bazuka:** C, CAR

**Beconase:** C4, C, A, HTV

**Centrum:** C4

**Colgate-Palmolive Soft & Gentle:** All areas

**Gentle Touch:** All areas

**Gillette Series Pacific Light:** All areas

**Ibuleve:** C4

**Macleans Bicarb Soda toothpaste:** All areas

**Imodium:** All areas except CTV, GMTV, TSW

**Otex:** C4

**Pepcid AC:** U, STV, B, G, C, HTV, W, LWT, TT

**Predictor:** CAR

**The Wrigley Company/Sugar Free Brands:** All areas

**Toepedo:** B, G, Y, TT, C4

**GTV** Grampian, **B** Border, **BSkyB** British Sky Broadcasting, **C** Central, **CTV** Channel Islands, **LWT** London Weekend, **C4** Channel 4, **U** Ulster, **G** Granada, **A** Anglia, **CAR** Carlton, **GMTV** Breakfast Television, **STV** Scotland (central), **Y** Yorkshire, **HTV** Wales & West, **M** Meridian, **TT** Tyne Tees, **W** Westcountry



## Lynx kicks off with £2m campaign

Elida Fabergé is investing in a \$2 million advertising campaign to support the launch of Lynx Skin System's Daily Face Moisturiser For Men.

The campaign will run throughout the month and kicks off with a 20-second TV commercial, emphasising the importance of skin protection for men.

Liverpool soccer star Jamie Redknapp will endorse the brand throughout the summer and autumn months in a \$215,000 press campaign that will feature in major men's consumer and sport magazines.

Jane Aspinall, category trade manager for male toiletries at Elida Fabergé, says: "The TV ad and the Jamie press ads should increase awareness of the brand."

**Elida Fabergé. Tel: 0181 481 6000.**

## Oil of Ulay cleansers offer anti-ageing benefits

Oil of Ulay's new Daily Renewal Cleansing range is the first mass-market cleanser with an 'anti-ageing' positioning. All three products are designed to "help reduce the appearance of fine lines while effectively cleansing the skin".

Daily Renewal Cleansing Milk (200ml, \$3.49) combines Ulay cleansers and Skin

Renewal Complex, which gently cleans and exfoliate as well as moisturising the skin.

Daily Renewal Toner (200ml, \$3.49) contains pro-vitamin B5, which is said to enhance the natural renewal process of skin cells, and Skin Renewal Complex.

Unlike traditional toners, Oil of Ulay's non-alcoholic formulation has been shown to

moisturise the skin, rather than drying it.

Daily Renewal Facewash (150ml, \$3.49) is a non-lathering, soap-free formulation of Skin Renewal Complex and micro beads, which gently exfoliate the surface skin cells. It removes dirt, oil and make-up without overdrying the skin or making it feel greasy.

All three

products have been dermatologically tested and are suitable for use on all skin types except sensitive.

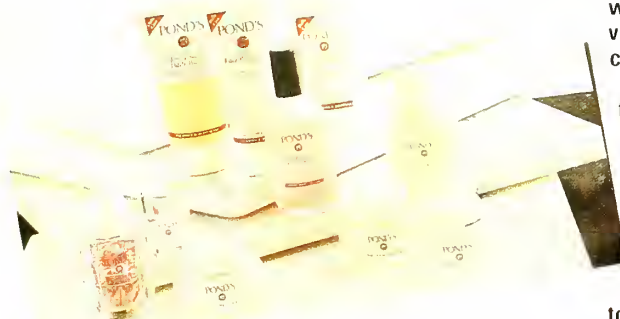
Consumers are advised on-pack of a free personalised skin care advice line, manned by an Oil of Ulay beauty consultant, on 0800 708708.

**Procter & Gamble (Health & Beauty Care) Ltd. Tel: 01932 896000.**

## Pond's gets makeover

Elida Fabergé is relaunching the cleansers and premium moisturisers in its leading skin care range, Pond's.

The programme involves revised packaging with clearer communication on the front of all packs. The skin care formulations and prices remain



unchanged. The range has been

simplified into three sections: Day Care, Night Care and Special Care, with a detailed

explanation on each product pack of how and when to use each variant, plus general skin care advice.

The line-up of formulations has also undergone a name change. The 'Performance' element, originally a sub-brand of the moisturiser collection, has been replaced with 'Pond's' to present consistent branding across the range.

**Elida Fabergé. Tel: 0181 481 6000.**

# STOP HAYFEVER EYES

Fast

Take a look at Otrivine Antistin



**CIBAVision®**  
Ophthalmics

CIBA Vision Ophthalmics,  
Flanders Road, Hedge End,  
Southampton, SO30 2LG England

OTRIVINE ANTISTIN ABRIDGED PRESCRIBING INFORMATION  
Presentation: Xylometazoline Hydrochloride BP 0.05% w/v and azelastine sulphate 0.5% w/v with Benzalkonium Chloride Ph Eur 0.1% w/v as a preservative. Also contains 0.001% w/v of benzalkonium chloride.  
Uses: For temporary relief of redness and itching of the eye due to seasonal and perennial allergies such as hay fever or allergy due to house dust. **Dosage and administration:** Antistin is a topical preparation. It should be used by the conjunctival sac. Children 5-12 years and the elderly: No specific studies have been performed in these patients. Due to possible systemic effect, caution must be exercised in the use of this preparation in children under the age of 5 years. When necessary, mydriatics or miotics may be administered simultaneously with Otrivine Antistin Eye Drops. **Contra-indications:** Warnings etc.: Caution in the use of Otrivine Antistin Eye Drops in patients with a history of glaucoma, hypertension, heart disease, or other conditions. **Precautions:** In patients who are receiving medication for hypertension, use of Otrivine Antistin Eye Drops may cause a rise in blood pressure. **Side effects:** Dryness of the eye, burning, stinging, or irritation may occur. **Drug interactions:** None reported. **Other information:** Otrivine Antistin Eye Drops are available in 10ml and 30ml bottles. **Legal Category:** OTC. **Date of preparation:** March 1996. **PA Number:** 5826/1 CIBA Vision Ophthalmics, Flanders Road, Hedge End, Southampton, SO30 2LG England. Basic NHS GMS price £3.49. IR £3.49. Legal Category: OTC. Date of preparation: March 1996.



## Agfa promotes CTX value pack

Agfa is driving sales this summer with a value pack for its CTX 100 process-paid film. The on-going promotion offers consumers two colour films for £12.99 – a saving of £4.99 on normal prices.

To emphasise the promotion, Agfa has put together a range of support material. This includes POS material to encourage impulse purchase and a show card which outlines the main features of CTX 100, with a sleeve to enable easy display.

**Agfa-Gevaert Ltd. Tel: 0181 560 2131.**

## Sight for sore eyes

Many people do not realise that eye lotions have to be thrown away a few weeks after opening, says Brodie & Stone. The company is introducing I-Doc, a preservative-free eye lotion presented in single-dose ampoules containing enough to bathe both eyes. The ampoules can be stored unopened for two years.

The main ingredient is distilled witch hazel 13 per cent v/v. An eye bath is included (5 x 10ml ampoules, \$3.29; 10 x 15ml, \$4.99).

**Brodie & Stone plc. Tel: 0171 278 9597.**

## Duracell Powercheck available now

Duracell's new Powercheck batteries, featuring an on-cell gauge-type tester, are now available.

The introduction of Powercheck will appeal to all consumers who want to know how much power is left in their battery.

The new batteries are available initially in the AA size and will be recognisable by the distinctive green and yellow Powercheck logo. The rrp (\$3.96) remains unchanged.

Glyn Harper, Duracell's marketing director, says, "Powercheck is a milestone for the battery market."

Duracell's Powercheck AA four-packs will be displayed alongside the rest of the range where the previous packs were sited.

Duracell will be implementing its product launch with pre-Christmas TV



advertising, beginning in October, and then extending the Powercheck range to triple A, C and D batteries in spring, 1997.  
**Duracell (UK) Ltd. Tel: 01293 517527.**

## US baby food range builds its UK distribution

The American Beech-Nut baby food range is now being imported into the UK by The Country Market.

Suitable for vegetarians, the range comes in three stages (for babies from around four months) and is fully kosher.

Promotional support includes leaflets, posters, shelf talkers and a free

weaning guide. UK stockists will also have the opportunity to enter a competition to win a trip to the US.

Distribution is currently limited to the Greater London and Greater Manchester areas through Colorama Pharmaceuticals.

**Colorama Pharmaceuticals Ltd. Tel: 0181 795 1616.**



## Seven Seas launches Korean Ginseng

Seven Seas is launching the new one a day 600mg Korean Ginseng capsule.

Sales of ginseng, an emerging line within the supplements market, grew by 16 per cent to \$4 million in 1996.

Seven Seas Korean Ginseng (30, \$5.59) will be supported by a promotional campaign, including sampling in the women's press, and in-store POS material.

**Seven Seas Health Care Ltd. Tel: 01482 375234.**

## Total care for athlete's foot

For athlete's foot sufferers, Seton Healthcare has introduced Mycota Complete Treatment Pack.

Designed to provide all that is needed to treat

and prevent athlete's foot, the new pack contains 25g of Mycota cream and 70g of Mycota powder. It retails at \$4.09.

**Seton Healthcare Group plc. Tel: 0161 654 3000.**



## New Colgate campaign is brush strokes ahead

Colgate-Palmolive is supporting Colgate Total Fresh Stripe, its new premium toothpaste, with a heavyweight advertising and promotional package for the trade and consumers this summer.

To stimulate consumer interest the Colgate Total 'brushing that works

between brushings' advertisement returns nationally to television screens in a \$1.2 million advertising campaign, running from mid-June to mid-July.

In addition, there is a national poster campaign, featuring two brushes, one topped with a short line of

toothpaste, the other with a line of Colgate Total Fresh Stripe, that extends across the page, with the message 'Outstrips other stripes'.

The campaign is part of a \$12.1 million spend behind the Colgate toothpaste range this year.

A mailshot sent to

pharmacies last week, offering the pharmacist up to \$7 cash-back with their first order of Colgate Total Fresh Stripe, is intended to cater for the consumer demand generated by the media campaign.

Rebecca Phelps, commercial category manager for oral care at

Colgate-Palmolive, says, "All-round support of Colgate Total Fresh Stripe will reinforce the brand, which now claims 12 per cent of the toothpaste market share, and is expected to grow in brand volume by 27 per cent in the first year." **Colgate-Palmolive Ltd. Tel: 01483 302222.**



## More power for Braun Oral-B range

Braun Oral-B has introduced a new range of electrical plaque removers.

The D9 Ultra range incorporates greater speed (an extra 1,000 oscillations per minute) and a power tip indicator brushhead designed to improve interdental cleaning.

The D9 Stop-Go Timer features two brushheads and storage power (£64.99); the D9 Personal a single brushhead (£49.99).

The new D9 Ultra range will be supported by a £1.5 million launch campaign from October to December. Point of sale material is available.

New, too, is the Braun Oral-B D7 Kids Plaque Remover, which is designed to help children improve their oral health (£49.99).

**Braun (UK) Ltd. Tel: 01932 785611.**



**With less than three months to go, plans for the new-look Chemex are well under way**

**N**ew is the word. A new venue, a new live demonstration area, new displays, new seminars and workshops, and new incentives are all shaping up to make this Chemex better than ever.

Over 60 companies have already confirmed that they will be exhibiting at Chemex '96. The UK's biggest annual pharmacy show is being held at the first of those 'news' – the new venue, Olympia 2, west London – on September 1-2.

As well as all the new items, the traditional Chemex highlights of product launches and big company names will also be there. Procter & Gamble, Pharmacia & Upjohn, Smithkline Beecham Consumer Healthcare, Crookes Healthcare, Goldshield Healthcare, Sterwin, APS Berk, Allergan Optical, 3M, Bausch & Lomb UK and Agfa-Gaevent have already all signed up.

Sponsored by *Chemist & Druggist* with support from the National Pharmaceutical Association, the new-look exhibition, now in its 14th year, will include two floors of innovations: from pharmaceuticals to beauty and healthcare, from business ideas to seminars.

"Chemex encompasses two basic elements," says exhibition organiser Rebecca Start. "On the business side, there will be a lot of promotional discounts, product launches, and pharmacists will be able to speak directly to the manufacturers."

"The second element is more an educational one. We have had a lot of feedback from pharmacists who are pre-registering. We hope to incorporate their requests into the seminars and workshops."

These are two of the new elements for this year's Chemex. The workshops, sponsored by Procter & Gamble and Ceuta in conjunction with *Chemist & Druggist*, *Community Pharmacy* and *Beauty Counter*, have been set up to cover topical items of interest.

The purpose-built exhibitor seminar theatre will allow for presentations with audience participation. It is hoped that the following subjects will be featured over the two days:

- retail security
- patient pack dispensing
- 'David & Goliath' – how to work in harmony in the face of competition from the multiples
- information technology (IT)

International Pavilion

# Countdown to Chemex

- a commercial approach to alternative therapy.

Interest is already mounting in the exhibition – at last Sunday's NPA 75th anniversary show, more than 260 pharmacists took the opportunity to pre-register for Chemex.

One of this year's incentives to pre-register is a prize draw. By saving time and registering now for the event, you could win a new computer for your busi-

**CHEMEX**

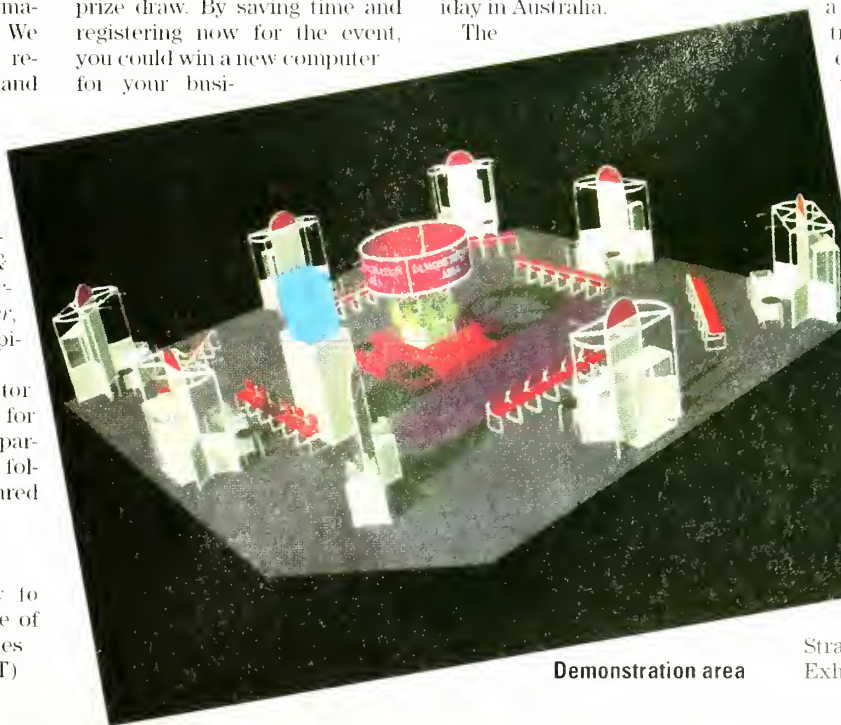


1-2 September 1996  
**OLYMPIA 2**  
London • England

ness. The Pentium 120 Multimedia PC, worth over \$1,400, could be yours.

If you are not lucky enough to win the computer, AM Marketing is sending pre-registered visitors a complimentary pack of Tru-Alo products, worth \$23.25, and giving them the chance to win a holiday in Australia.

The



Demonstration area

NPA Village is one of the successful features carried over from previous shows. This will give members (and potential members) the chance to find out what the association is doing.

It will also offer a forum where you can ask for advice or offer your opinion on NPA or any other business matters.

The International Pavilion and the demonstration island are two areas created specially for this year. The Pavilion has been set up because of growing overseas interest in the increasingly lucrative UK pharmacy market. It will give visitors the chance to see what is new in the pharmacy world outside the UK.

The demonstration island will allow beauty and healthcare companies to present their products, with a chance for audience participation. The seven counter stands will allow visitors to see how the new products can be used or promoted in the pharmacy.

To tempt you to take advantage of the many special promotions and offers exclusive to Chemex, visitors are being offered a voucher book to add to the savings. Every exhibitor is being encouraged to participate in this voucher scheme.

Ms Start says that pharmacists and exhibitors have welcomed the move back to a more central London site. Olympia 2 is easy to reach by public transport.

There are London Underground stations at both Earls Court (District and Piccadilly lines) and Kensington Olympia (District line) – which also has a railway station, served by trains on the Intercity Manchester, Birmingham, Gatwick, Brighton and Dover lines. The organisers are hoping to confirm a special family ticket price with rail companies. Alternatively, you can reserve a place at the 2,100-space car park.

For visitors on the Sunday, there will be a creche and organised activities for children up to 16 years old.

So, if you haven't already sent in your pre-registration card for Chemex '96, now is the time. Contact the registration hotline on 01304 614644. Any new exhibitors who haven't booked a

stand, should contact John Stratford at Miller Freeman Exhibitions on 0181 302 5585.



# Pharmacists forced into a strict diet

As many as 1,000 German pharmacists have been caught in the crossfire in a battle for the lucrative slimming preparations market. Even though the argument was between two manufacturers of dietetic products, every pharmacist was warned by the lawyers of one company that if they did not pay \$500 in legal costs by February 9, 1996, they could face a fine of around \$2,600.

The story began with an apparently innocent telephone call to pharmacies enquiring whether they could supply an obscure product, Vita Natura Diet, said to be made in England and marketed in Luxembourg.

Since its name appeared in the German tariff of licensed medicinal products, most pharmacists said yes, although few had ever heard of, or actually stocked it, and not a single sale was made.

The caller turned out to be enquiring on behalf of a company called Jeunique International



(Germany), which alleges that Vita Natura Diet does not contain the minimum specified amounts of protein and carbohydrate required by German regulations for dietary foods intended for use as a meal or as part of a slimming diet.

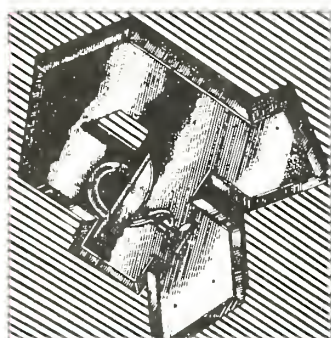
Jeunique has advertised a diet of identical composition in a fitness magazine which it proposes to sell directly to the public. This product is not listed in the German tariff.

The next stage in the saga came when the hapless pharmacists received a letter from a Munich firm of solicitors acting on behalf of Jeunique, accusing pharmacists of behaviour associated with unfair competition, demanding a declaration that they would stop selling Vita Natura Diet forthwith as it contravened German regulations and also requesting payment of

legal fees incurred in issuing the warning.

Regardless of whether Jeunique is correct about the contents of this product, the first concern of pharmacists was whether a simple reply to a telephone enquiry could be regarded as offering an illegal substance for sale, when they had never ordered, seen, stocked or handled it! Pharmacists also wondered why they should be in the front line instead of the companies fighting it out in the courts.

Fortunately, assistance for pharmacists came in the form of a temporary injunction obtained by a German association for protection against criminal business activities that prevented any further harassment of pharmacists by Jeunique. In addition, one regional association of pharmacists has also succeeded in legal action against the company.



## Doctors win reprieve over disease coding

The start date for compulsory use of the International Classification of Diseases (C&D February 10) has been postponed until January, 1998, following outright opposition from the country's general practitioners.

Until 1998, use of the coding system will be voluntary and the previous system of writing diagnoses out in full may continue.

In the meantime, a working party will examine ways to make the system easier to use and a representative number of medical practices and hospitals will take part in a six-month trial starting in January next year.

However, accusations that use of the coding system infringes data protection laws have been firmly rebutted.

## Pharmaceutical care tested

After a year of collaboration by pharmacists and doctors, the first German study of the concept of pharmaceutical care began on April 1 in Augsburg.

Respiratory diseases – in particular asthma – have been chosen to test the idea that intensified advice, instruction and monitoring by pharmacists can improve the quality of life of the patients and strengthen the contact between pharmacists and their medical colleagues.

Pharmacists are to teach patients how best to use sprays and spacers, reassure them about the diagnosis and therapy, and explain their drug treatment with them.

The aim is to improve understanding about asthma therapy and reduce problems of compli-

ance and misuse of the administrative devices.

Advice will be given in the pharmacy and noted on a report form. With patient consent, the form is sent to the doctor.

The patient and doctor then jointly decide whether the advice given by the pharmacist was helpful. The pharmacist may be asked to give further advice or assistance.

The recording process may be time-consuming (incidentally, no mention is made of any payment to staff participating in the study!), but the organisers of the study believe it is essential to enable a scientific evaluation of the results.

It is also hoped it will serve to foster closer ties between the two healthcare professions.

## Crusader runs into trouble

The German pharmacist who started a one-man crusade last summer against expensive products of dubious medical efficacy with the eye-catching, if somewhat crude, slogan 'Crap of the month' (C&D September 2) is being sued for damages.

The manufacturer of one of his targets, the shark cartilage preparation Shark-fit is claiming damages of \$90,000, as well as costs of at least \$45,000.

The pharmacist is, however, receiving considerable support in his fight for survival. Even the president of ABDA, the umbrella organisation of German pharmacists, has pledged his personal financial support, but stated that, for legal reasons, ABDA itself cannot do so.

The regional branch of pharmacists in the man's home state of Hessen and individual pharmacists have set up fighting funds to save him from financial ruin should he lose the case, and messages, overwhelmingly of support for his actions, have flooded in.

Stimulated by his attempt to alert the public to products of questionable benefit to health, the Hessen chamber of pharmacists has recently established a drug testing foundation to investigate dietary supplements and OTC preparations. This foundation will receive all the donations intended to help the pharmacist if he wins his court battle.

At a press conference launching the foundation, it was pointed out that an increasing number of products had been introduced into the grey zone between medicines, food supplements and dieting aids, in some cases accompanied by misleading advertising which confused the public.

Well known pharmacologists and other experts have already declared their willingness to participate in the work of the foundation, which the organisers hope will draw support – both moral and financial – from other regions of the country and maybe even ABDA itself.

## A cautionary tale ...

A true story illustrating the continuing need for a pharmacist's advice when handing over prescribed medicines.

A German lady complained to the pharmacist that the long white tablets she thought were too big to swallow spoilt the taste of her cup of coffee when she dissolved them in it. No prizes for guessing what they were!



# Sufferers choose it for speed You recommend it for peace of mind Brilliant new deal for you in 1996

With Clarityn Allergy, hayfever sufferers get what they want; relief from symptoms within minutes<sup>1</sup> – nothing works faster! What's more they'll stay alert throughout the day<sup>2</sup> and be sure of a full 24 hours relief<sup>3</sup> from a single tablet.

With Clarityn Allergy you get all the peace of mind you need. Clarityn Allergy has two metabolic pathways<sup>4</sup> so there are no clinically relevant drug interactions.<sup>5,6,7</sup>

Equally important, Clarityn Allergy does not potentiate the effects of alcohol.<sup>8</sup>

Last but not least, there's a brilliant new deal for you and your customers in 1996 – an unbeatable 35% POR on both Clarityn Allergy and Clariteyes, and a new 7 tablet pack for the same retail price as last year's 5 tablet pack.



#### Product Information

**Clarityn Allergy:** Clarityn Allergy tablets contain 10mg loratadine. *Indications:* For the relief of symptoms associated with hayfever, allergic rhinitis and urticaria. *Dosage:* Adults and children aged 12 and over: One tablet once daily. *Contra-indications, precautions:* Hypersensitivity. Pregnancy and lactation. *Side-effects:* Rarely, fatigue, nausea and headache. *Pack size:* Cartons of 7 tablets. *Retail price:* £3.95. *Legal category:* [P]. *Product licence number:* 0201/0175. *Product licence holder:* Schering-Plough Ltd, Welwyn Garden City AL7 1TW. *Date of last revision:* August 1994.

**Clariteyes:** Clariteyes Eye Drops contain sodium cromoglycate Ph.Eur. 2% w/v. *Indications:* For the treatment of acute seasonal (allergic) conjunctivitis including hayfever. *Dosage:* Adults, children and the elderly: One or two drops into each affected eye up to four times daily. *Contra-indications, precautions:* Hypersensitivity. *Side-effects:* Transient blurring of vision, burning, itching may occur. *Pack size:* 10ml. *Retail price:* £3.95. *Legal category:* [P]. *Product licence number:* 0201/0191. *Product licence holder:* Schering-Plough Ltd, Welwyn Garden City AL7 1TW. *Manufacturer:* Waverley Pharmaceutical Ltd, Runcorn, Cheshire WA7 1QE. *Date of preparation:* January 1994. Prices correct at the time of going to press.

**References:** 1. Soto Roman L. *Today's Ther. Trends*, 1988; **6**, 19-27. 2. Betts T. *et al.*, *Proc. XII Int. Cong. Allergol. and Clin. Immunol.*, Montreal 1988; 74-79. 3. Bannett E. *et al.*, *Am. J. Allergy*, 1989; **17**, 150-156. 4. Hey J.A. *et al.*, *J. All. Clin. Immunol.*, January 1994. 5. Affrime M.J. *et al.*, *J. All. Clin. Immunol.*, 1993; **91**(1): 269. 6. Data on file, Schering-Plough. 7. *Annals of the American Research Foundation*, February 1994. 8. Musci L., Plutman H., Bueckman M., *Eur. Acad. of Allergy and Clin. Immunol.*, Budapest, May 1986. Abstract.



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Visitors to the National Pharmaceutical Association's 75th anniversary show in St Albans got more than they bargained for last Sunday. In addition to the 50-odd exhibitors packed into the Alban Arena, there was a question and answer panel, surgery sessions and tours of the NPA's headquarters. And, if that wasn't enough, there was also blazing sunshine and street entertainers

The National Pharmaceutical Association could not have wished for a more perfect day for its anniversary show. The warm weather and blazing sunshine helped to draw the crowds to leafy St Albans, which was also holding its annual town celebrations that same weekend.

NPA director Tim Astill and chairman Peter Jenkins welcomed the mayor and mayoress of the City and District of St Albans to the show marking the NPA's 75th anniversary. They were later presented with a Delft apothecary jar as a memento of their visit.

NPA surgery sessions were held throughout the day, with board members taking it in turn to answer members' queries.

One of the busiest areas of the



NPA surgery ... Board members Gerald Alexander (far left), East London & Essex region, and Hemant Patel (far right), East Anglia region, set up a clinic at the *Pharmacy Today* stand to give advice on a range of business and professional issues. First appointments went to John Relevy and Joe Moses from Templars Chemists in north west London



Pharmacist Barry Wilson and his wife and business partner, Margaret, are this year celebrating 30 years of running Wilsons Chemists in Derby. They stopped off at the Proprietary Articles Trade Association stand to chat to its director, Gerry Harraway (standing). They told him how they were taking an active stance on Resale Price Maintenance by writing to their local MP

# Showdown

show was the stage set of shop-fitters, where the NPA pharmacy planning team was on hand to give free consultations.

Around 200 visitors took up the chance to go on guided tours of Mallinson House, which were planned throughout the day. But those after more action-packed entertainment needed to look no further than the Alban Arena courtyard, where the Regeneration Theatre Company, fronted

by Mr Astill's son and daughter, sang and danced the lazy Sunday afternoon away.

Mr Astill says: "There was a very friendly, family atmosphere to the day. Although attendance levels were down on our 1991 show, the positive and appreciative comments from visitors and exhibitors indicated that this was our most successful and enjoyable yet."

Away from the hubbub of the



The mayor and mayoress, reverend councillor Robert Donald and his wife, Elaine, are welcomed to the NPA show by the Association's chairman, Peter Jenkins (far left), and director, Tim Astill (far right)

## Manpower questioned at the NPA

There is a manpower problem, although a lot of the evidence is anecdotal, believes Tim Astill, director of the National Pharmaceutical Association.

Mr Astill was speaking at a question and answer session held in the afternoon. Deputy director John D'Arcy and Valda Elson from the personnel and employment section completed the panel of NPA officers.

Mr Astill added that the NPA will be meeting the Royal Pharmaceutical Society and heads of the schools of pharmacy to see if there really is a problem, or whether employers are just not offering enough money.

Factors affecting manpower are extended hours and women

taking career breaks, he said. The level of pay may not be a factor, however, as jobs that are being advertised with no salary mentioned, or jobs that are re-advertised with a higher salary, are not getting many inquiries.

"The answer is not necessarily to recruit more undergraduates," he said. "There has been an increase in the intake of undergraduates, but there has not been a proportionate graduate output. There is a greater dropout rate with the falling standards of A levels."

"Locum agencies are finding locum rates are going through the roof," said Mr D'Arcy. This has been a complete reversal since 1992, he added. "The new positions, such as pharmacy adviser, are providing a new outlet for pharmacists and is just part of a drift away from community pharmacy," he said.

Although the only complete figures, which are kept by the RPSGB, indicate that everything is all right, Mr D'Arcy said: "Something is going wrong, and the situation seems worse this summer."

Asked about the Dunnington



# at the NPA

show, NPA board member Graham Delves (East Sussex & Kent region) was at Mallinson House answering questions being put to him by BBC Southern Counties radio presenter Adrian Love on child safety in the home.

The programme, which was being broadcast live, wanted Mr Delves to advise listeners on know-how to keep medicines safe at home.

"Adrian Love is an asthmatic

and he wanted to know how people can watch out for things that are not readily identifiable as medicines, such as inhalers and vitamins," said Mr Delves.

Mr Delves advised listeners to lock medicines away from the reach and sight of children; teach them not to play with medicines; warn them not to swallow anything that was unfamiliar; and stressed that pharmacists were the medicines experts.



On the inside ... tours of Mallinson House and its gardens proved popular with members and their families, who were curious to see how the NPA was run on a day to day basis



From left: the National Pharmaceutical Association's Valda Elson, Tim Astill and John D'Arcy at the Q&A session. Mr Astill welcomed the audience to the "claustrophobic bunco booth", which was hosting the creche for the rest of the day

decision and the so-called 'Clothier loophole' (*Chemist & Druggist* May 25, p714), Mr Astill said that the law should be obeyed until it was changed. In Northern Ireland, pharmacists have recently seen the limit extended from one mile to five kilometres. He suggested that pharmacists should agree with doctors that the drafting is sloppy, and negotiate to extend dispensing limits in rural areas.

The judicial decision to consider shopping malls as neighbourhoods (*C&D* June 1, p753) was "perverse", said Mr Astill. There have been more than five definitions of 'neighbourhood', he added.

"Definitions vary and it is up to the judge's opinion," said Mr D'Arcy. "A High Court ruling is not binding, and can go higher," he continued, but he queried the judge's arguments for this definition of neighbourhood.



The Royal Pharmaceutical Society stand attracted those wanting to find out about the latest offerings. John Ferguson (second right), secretary and registrar of the Society, was on hand to speak to visitors



A race to the finish ... visitors to the *Chemist & Druggist* stand revved up their engines for a chance to win an Xrayser clock. Meanwhile, the C&D team was answering questions on a wide range of topics

The NPA is preparing to fight to retain Resale Price Maintenance in the courts, although Mr Astill, who is also chairman of the public relations sub-committee of the Community Pharmacists' Action Group, hopes that the Office of Fair Trading will not take it that far.

Describing Asda as a "distracting irrelevance", he said that the profession "is in a phoney war at the moment" over RPM. He was not surprised that the OFT was reviewing the situation following the appointment of a new director.

There are two hurdles in the review, he explained. The first is that the OFT must show there has been a material change in the market since the 1970s. To counter this, the NPA would have to show there had been no change, or that pharmacists were more dependent on proprietary medicines than in 1970.

The second hurdle would come if the OFT decided to proceed. This would then have to be fought in court, said Mr Astill. Anticipating this, the NPA have commissioned a research group to collect data on the number of

pharmacies that would be at risk and the number that would close with the removal of RPM.

After the ending of the net book agreement, "the book market has grown, but at the expense of margins", he said. "The medicines market will not grow, so trade will be taken from other businesses instead."

Although the RPM decision is not a parliamentary matter, Mr Astill stressed the importance of pharmacists writing to their MPs. The OFT works under the Government, so getting MPs' support will create pressure to influence the OFT, he explained.

The audience was reminded of the problems in transferring a business, where solicitors often forget about staff in the transfer. If that happens, Mr Astill said the NPA would like to hear, as it may be necessary to take legal advice against the solicitor for not giving good counsel.

Ms Elson said that when a business is bought as a going concern, purchasers must take on the staff with all their rights and obligations. "Members should check with the NPA - it is quite a knotty area," she said.



# NPA to produce disease management protocols

The National Pharmaceutical Association is to prepare disease management protocols incorporating pharmacist involvement in managed care.

There was considerable concern at the May Board meeting about the effects of managed care in North America and it was agreed that, if managed care were to come about in Britain, considerable effort would need to be made to ensure that community pharmacists were fully consulted and involved.

The NPA will also be responding to a discussion paper on disease management from the NHS Executive.

**Doctor co-operatives** The NPA is advising members not to contract to supply medicines to GP co-operative groups which provide an emergency out of hours medical service.

Some co-operatives suggest pharmacists will supply the emergency medicines at their own cost to the co-operatives for onward supply. Prescriptions would be issued to the pharmacist by doctors in the co-operative only after the medicine had been supplied. The Board was

concerned that, unless the pharmacist is contacted on every occasion by the doctor, the system would be unlawful.

**Cancer care** The NPA expressed support for the Society's model on good pharmaceutical cost in providing cancer services in the community. For instance, the establishment of specialist 'cancer care' pharmacies which would stock and supply drugs and equipment. But the Board suggested an increase in the range of available Drug Tariff equipment, dressings and appliances, the loan of specialist equipment, such as syringe drivers and nebulisers, and greater involvement in hospital admission planning. The Board emphasised to the Society the importance of adequate remuneration.

**Manpower** It was agreed that a further meeting be held with representatives of the Society and the schools of pharmacy to discuss the problem and the particular difficulties likely to arise as a result of the 'fallow' year.

**Information department** The Board welcomed and approved a five-year business plan for the NPA information department.

The plan included the use of the latest electronic technology for maintaining and accessing information, continuous update of staff skills and knowledge, improved distribution of information leaflets and other literature and investigation into ways of generating additional income.

**Competition law reform** The Board is to respond to a consultation document from the Department of Trade and Industry which suggests the present arrangements for tackling unfair competitive practices are unsatisfactory, that the Restrictive Practices Court should be replaced by a specially-constituted Tribunal and that the powers of the director general of Fair Trading should be significantly enhanced.

The Board's reply will refer to the need to retain Resale Price Maintenance on proprietary medicines, will argue that the public interest should be maintained as the major criterion for considering practices which might be regarded as uncompetitive and that the current exceptions for professional rules should be extended to apply to pharmacists.

## Barnet travel bags

Travellers in Barnet are getting ready for their holidays with a free travel health bag from the borough's 80 pharmacies.

The 50 'Have fun, be safe, be worldwide' travel kits contain humorous postcards with advice on sun awareness, safe sex and travel jabs, as well as condoms and high-protection sunscreen.

The focus is exclusively on pharmacies this year. Barnet Health Authority spokesperson Mary Crawford explains: "Informal feedback from last year revealed that pharmacists were best placed to give travel health advice and we feel pharmacies are very accessible."

## Essex cares for skin

Pharmacists in North Essex are to receive training in skin care as part of a sun awareness health promotion campaign.

The North Essex Health Authority's 'Shift to the shade' initiative involves pharmacists distributing consumer leaflets and participating in training courses with dermatologists later this month.

The local pharmaceutical committee hopes the project will be the starting point for closer liaison between the LPC and the health authority's health promotion team. Already discussions are under way on a pharmacy health promotion pilot project, with a meeting set for early next month.

## LETTERS

### Calling all sales reps

I am addressing my comments to all readers who are sales representatives or have been so engaged.

The Commercial Travellers' Benevolent Institution is a well funded charity to assist in the welfare of members of our profession who find themselves in financial need. These people are in many cases unaware of us, and without your assistance we find it most difficult to identify them.

I am appealing to you, active selling men, to search your minds and identify present and past sales representatives or their widows who have fallen on hard times. These people could be in desperate need, and we need to know who they are to be of assistance.

With the demise of our kindred associations, we now lack the network of informed intelligence letting us know of representatives and their

families in reduced circumstances.

We also need to increase our list of voluntary subscribers to the fund (£5 per annum would be sufficient on standing order) and become a governor of the Institution.

Please send on any recommendations you might have and we will look into them.

**Colin Sayles**  
Chairman, Commercial Travellers' Benevolent Institution. Tel: 0116 247 8647, fax: 0116 247 8116

### Vigilance necessary in generic prescribing

Although the principle of generic prescribing is generally laudable, resulting in obvious cost advantages, there are occasions where clinical and pharmaceutical factors dictate that a specific brand be consistently utilised for an individual patient.

Clearly, prescribing by proprietary name should not be widespread, rather reserved for situations where dangerous sequelae might result from changes in brand or formulation. Prescribing the immunosuppressant cyclosporin serves as such an example, where at present less than 20 per cent of prescriptions are written for branded products.

The newly-modified formulation of cyclosporin (Neoral) has produced a marked improvement in absorption and bioavailability profiles compared to the conventional formulation (Sandimmun). These improvements have led to the transfer of many transplant patients to the new formulation.

However, there are now risks that incorrect prescription or supply of conventional cyclosporin for the newer formulation might result in graft rejection through under-

immunosuppression subsequent to reduced bioavailability. Conversely, inappropriate prescription of Neoral instead of the conventional Sandimmun might result in serious infection resulting from unintentional over-immunosuppression.

These problems have been recognised by the manufacturer and the licensing authorities, which have recently effected changes in the licences for these agents, indicating that prescriptions for cyclosporin are best written by specific proprietary name.

In situations where transposition of non-equivalent formulations might occur, the vigilance and timely intervention of the primary care pharmacist will be of life-saving importance.

**Dr J Marriott**  
Clinical services manager, Birmingham Heartlands Hospital





# No1 for hayfever eyes



Opticrom Allergy Eye Drops are your pharmacy brand leader with over 54%\* of the hayfever eye treatment market. In fact, Opticrom has led the way since launch, echoing the success of the original Rx brand.

This season Opticrom means even more business, with a massive campaign featuring radio, women's magazines and national press advertising, plus eyecatching point-of-sale support to help keep sales on top.

For orders, point-of-sale materials or details of our 'display to win' competition, call 01323 534000, or contact your Fisons representative. When you stock and recommend Opticrom, you're opening your eyes to success.

**Opticrom®**  
ALLERGY EYE DROPS

**Soothing relief for itchy hayfever eyes**

**Product Information:** Opticrom Allergy Eye Drops: Solution containing sodium cromoglycate 2.0% w/v with benzalkonium chloride, disodium edetate, purified water. **Use:** For fast, effective treatment of itchy, watery or inflamed eyes caused by seasonal allergic conjunctivitis. **Contraindications:** Hypersensitivity to any of the ingredients. **Precautions:** Do not use whilst wearing soft contact lenses. Caution should be exercised during the first trimester of pregnancy. Discard any remaining contents four weeks after opening the bottle. **Warnings:** If patients suffer from allergic eyes for more than 3 months of the year, they should see a doctor or pharmacist. This product should not be used continuously for more than 3 months without the advice of a doctor. **Dosage:** 1 or 2 drops into each eye 4 times daily. **Side effects:** Transient burning, stinging and blurring of vision. **Packaging quantities:** 5ml and 10ml bottles. **RSP:** £2.99 for 5ml and £3.99 for 10ml. **Legal category:** P **Product licence number:** 0113/0161 **Licence holder:** Fisons plc, Osprey Hall, Leics LE67 8GP. Opticrom is a registered trademark of Fisons plc. Date of preparation: February 1996. **MKT/OPT/196/96**



# Teleshopping warning for pharmacists

**With one in six medicines coming to the market aimed at self-medicating consumers, the 32nd meeting of the European Proprietary Medicines Manufacturers' Association (AESGP) in Istanbul examined possible ways of boosting the sector – from alternative distribution to switching indications**

**T**he pharmacist's role as the central provider of self-medication may be short-lived, OTC medicine manufacturers were warned last week by Dr Cormac MacNamara, president of the European Union of General Practitioners.

Pharmacists are being told by manufacturers that they have a valued role in self-medication, but Dr MacNamara felt this would be transient.

Instead, pharmacists would be replaced, within the next decade, by teleselling or by computerised cards used to purchase medicines, he predicted.

Certainly, European Commis-

sioner Dr Martin Bangemann backs the teleshopping concept, in the belief it will solve the prob-



**Left to right: Professor Ernst-Dietrich Ahlgrimm; Jim Murray; Patrick Deboyser; Dr Cormac MacNamara; Mel Read, MEP; and Professor Petko Uzunov, deputy minister, Ministry of Health, Bulgaria**

lems some of the members of the European Parliament have with self-medication.

But Patrick Deboyser, head of unit pharmaceuticals at the European Commission, speaking at a panel discussion, was less optimistic about the brave new world of teleshopping as it would negate each country's individual stance on OTC products. Rather, he favoured distance selling.

"We have accepted for distance selling that it is for each member state to decide, but this may be difficult for teleshopping, which is cross-border. A total ban on teleshopping may be needed," he said.

The pharmacists' role was defended by Professor Ernst-Dietrich Ahlgrimm, president of the pharmaceutical group of the European Union.

"Individual consultation cannot be given either in a supermarket, nor through a teleshopping system as Mr Bangemann stressed, nor by mail order – only by a pharmacist."

This disapproval was condemned by Jim Murray, director of the Bureau of European Consumer Associations. "We strongly oppose pharmacists who do not want medicines to be available through distance supply. We are not in favour, but we are for proper experiments and trials in this area."

## Dutch bypass pharmacy

Dutch authorities have dropped the Pharmacy only class of medicines, allowing all OTCs to be sold by registered druggists.

Until this year, the Netherlands had mirrored the British approach: Prescription only, Pharmacy Medicines (semi-ethicals) and OTCs, which could be sold through pharmacies and druggists.

But to remove the "unfair competition between pharmacists and druggists", said Nico Alberts, vice president of Neprofarm, the Dutch equivalent of the Proprietary Association of Great Britain, there are now only two classes: Prescription and OTC.

Although this is still a transitional phase, a number of previously Pharmacy Medicines have moved to OTC, such as non-sedating anti-histamines, nicotine patches and acyclovir.

This should mean market growth of around 9 per cent over the next three years, said Mr Alberts. The impact on pharmacists was not touched upon. Druggists have to update their knowledge by next year.

"Dutch druggists are proving once again their qualitative role in the distribution of self-medication products next to the pharmacist," concluded Mr Alberts.

## Call for 'cognac' category

There should be a third category for products which fall between the classification of a drug or food, said European Commissioner Dr Martin Bangemann.

Citing cognac as an example, he said a product could be either a drug or a food or "it can be many things between the two". It can have a positive health benefit while also being a food, he suggested.

The current legislation made it

impossible to codify such things because products could be either

one or the other.

But his EC colleague Patrick Deboyser, head of unit pharmaceuticals, contradicted Dr Bangemann's view.

"Either a company makes a therapeutic claim and it becomes a drug product, or it's a foodstuff and it makes no claim. We should not try to make something in



**EC commissioner Dr Martin Bangemann**

between," he argued.

## Look for new opportunities

**O**TC manufacturers in the UK are having to look for new opportunities in a mature market, said Dr Alan Raymond, president of the Proprietary Association of Great Britain.

With every major prescription company investing in the OTC sector, to the tune of \$104 billion globally, and the POM to P switch procedure established in the UK, the issue now is how to expand the market through volume growth.

"The prime goal is to promote responsible consumer healthcare and to do that we need to have the support of Government, doctors, pharmacists and consumers," said Mr Raymond.

"Pharmacists are clearly in favour of this goal which enables them to play a greater part in the primary healthcare system." So far, the UK has seen twice as many switches in the past three years as there have been in the previous ten.

But the next real opportunity is the switch of indications, such as the treatment of baldness, eczema, temporary sleeplessness, vaginal candidiasis and arthritic pain. "They offer new OTC marketing opportunities which companies are now taking up."

The focus now is on influencing doctors and building OTC awareness through the PAGB Directory. "There is a real benefit



**PAGB president Dr Alan Raymond**

in saving GP time and Government money. The average cost of an OTC is \$2.30, but if a patient takes a cold or minor pain to a doctor it costs our NHS \$24 – a ten-fold increase."

### UK top ten market shares

Company	Per cent
Smithkline Beecham	12.1
Warner Wellcome Glaxo	10.1
Reckitt & Colman	6.1
Boots	6.0
Roche	4.9
American Home Products	4.4
Novartis	4.2
Seven Seas	4.0
Seton	3.1
Procter & Gamble	2.9

**The top ten manufacturers account for 58 per cent of total UK OTC sales.**



## Trading on trademarks

One of the major barriers to the expansion of self-medication in Europe is that companies are not allowed to retain their product trademarks after switching.

The AESGP is so concerned at this potentially limiting factor that it has launched a brochure, 'The value of the same trademark for medicines with a different legal status'.

"To force companies to establish another trademark once a certain form of medicine is moved from prescription to non-prescription status is against the interest to provide the best possible information to the consumer and to health professionals," maintained the AESGP's director, Dr Hubertus Cranz.

As well as the cost involved for companies in establishing a new trademark, "it is confusing for

people to be confronted with a new name once a product is moved to non-prescription status and should be more easily available to them", he added.

The advantages of keeping the same brand name are outlined in the brochure. The OTC variant can capitalise on the prescription heritage; it is easier for doctors to recommend a brand they are familiar with, as it is for pharmacists; and it will aid adverse reaction monitoring.

It would also, says AESGP president-elect Hugues Lanrezac, prevent the marketing of "unbranded me-too products".

The argument against keeping the name focuses on the fear that script sales would leap as a result of advertising the OTC version to the public. This fear is dismissed by Dr Cranz.

## Patient focus of new strategy

Patient expectations are to be the focus of the new AESGP strategy. The Association's president elect, Hugues Lanrezac, said the strategy had two roots. The consumer is the main focus of the healthcare industry's philosophy and manufacturers' marketing; and self-medication is one of the principal answers to the right of everyone to take his own independent decisions concerning health.



Hugues Lanrezac

The new strategy will be founded on what the European consumer needs, he said:

- the safety, efficacy and quality of products which requires

switching of ingredients and indications, as well as mutual recognition for products from other OTC countries.

"From January, 1998, the mutual recognition procedure will be the only route to gain access to other markets in the EU," said Mr Lanrezac.

- better access to products – a trial is under way in France looking at developing "a kind of ideal pharmacy"

- needs being reassured by trademarks

- better communication between consumers, pharmacists and doctors

- clear information and regular advertising.

The opportunity information technology offers consumers in terms of accessing healthcare advice should not be viewed as a threat by pharmacists and doctors.

Rather, said Dr Marcelo Sosa of the European Commission, it should serve as a back-up for their roles as guides and sources of professional advice.

## No threat from technology

The growth of the Internet will mean consumers will be increasingly able to access health information sites from pharmacies and health centres, said Dr Sosa.

The potential for applying

such new technology to the self-medication arena is under examination in the EC's Tesemed project, launched early this year. Not only will it investigate trends in self-medication it will also

explore the prospects for installing information kiosks to provide community pharmacies and professionals with information and education on responsible self-medication.

Two protocols are planned: a care protocol for pharmacists and an education and self-medication protocol for consumers.

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DO3070 MAY 1996



# Three little pharmacies ...

**The arrival of a superstore pharmacy in your neighbourhood can be looked on as a disaster or a challenge, says John Kerry**

When Mr Y bought his pharmacy three years ago, it was the poor relation of three independents, which together controlled the script business on the southern side of a small industrial town.

Of the three, Mr X did particularly well in his main road position, a mere stone's throw from the main health centre, which houses two practices – a total of eight GPs. Mr Z, a mile away in the thick of a residential area, made, and still makes, a decent living from his pharmacy.

Our man, Mr Y, a mile away from the health centre in the other direction, also gets a nice slice of the health centre scripts, because he is situated in the middle of the council housing from where the practices draw their patients.

It is a smaller slice, but fortunately a single-handed GP practice nearby provides Mr Y with 40 per cent of his prescriptions.

Mr Y took the business over from a retiring pharmacist owner, who established it 27 years previously. However, in the last ten years of his occupation he

were maintained, particularly in the dispensary, and giving everyone that little extra bit of attention, the business soon grew. Mr Y achieved a magnificent 26 per cent increase in gross turnover in his first year, followed by more modest 8 per cent increases in the following two years.

Both Mr X and Mr Z knew that a new boy was in town. All three have operated in polite, competitive harmony for the last three years and fully expected to do so for the next ten.

That was until two months ago, when a grocery multiple opened a new out of town superstore and decided that it would be nice to have a pharmacy in it. Since it was situated near the health centre, and therefore Mr

X's pharmacy, Mr X was the target for acquisition. The 'men in suits' came with a chest full of cash. They made him a offer he couldn't refuse – and he didn't.

What do Messrs Z and Y make of all this? Mr Z is convinced that no good will come of it and that the new pharmacy will attract business away from him, while Mr Y is sure that it is good news and that his business can capitalise on the situation. But how? he asks. After all he's still a mile from the health centre.

## Assessment

What has to be done first is to study both the strengths and weaknesses of the new pharmacy to see where the opportunities are for his business.

The superstore's advantages are its position, its reputation, its size, the car parking facilities and, above all, the fact that it offers one-stop prescription and general shopping in warm, comfortable surroundings.

On the downside, Mr Y agrees, are the store's multiple status and the pharmacy's position in-store. This is not a conventional pharmacy on the perimeter of the store or in a mall outside. This one is slap-bang in the middle of the supermarket, situated right in among the pet food and cornflakes.

In fact, this pharmacy is a fat island gondola, on one side healthcare in glorious designer colours, and on the back grapefruit. Clearly, certain people will

## Trading, and profit and loss account for the year ended January 31, 1995

	1996	1995	1994
<b>Sales</b>	<b>336,373</b>	<b>312,266</b>	<b>290,321</b>
<b>Cost of sales</b>			
Opening stock	23,700	25,249	
Purchases	225,222	219,949	
Closing stock	(24,219)	(23,700)	
	<b>224,703</b>	<b>221,498</b>	
<b>Gross profit</b>	<b>87,563</b>	<b>68,823</b>	
<b>Less overheads</b>			
Salaries and wages	16,635	15,890	
Locum	4,080	1,017	
Motor running expenses	2,890	3,682	
Repairs and renewals	352	685	
Telephone charges	819	822	
Printing and stationery	755	897	
Subscriptions	486	-	
Sundry expenses	280	1,303	
Heating and lighting	781	749	
Property insurances	702	758	
Use of home as office	260	260	
Rent and rates	3,564	4,425	
Loan fees	-	1,472	
Loan interest	6,394	6,353	
Lease charges	2,815	1,415	
Bank interest and charges	488	29	
Hire purchase interest	519	-	
Computer systems update	836	-	
Legal fees	-	1,140	
Accountancy charges	735	700	
Depreciation – vehicles	5,011	2,375	
Depreciation – fixtures and fittings	477	358	
(Profit)/loss on sale of assets	2,360	-	
	<b>51,239</b>	<b>44,330</b>	
<b>Net profit</b>	<b>36,324</b>	<b>24,493</b>	

**This is no ordinary pharmacy ... it is slap-bang in the middle of the supermarket!**

had let retail and service standards slip, leaving a rather dated, shabby and badly-run business for Mr Y to develop. Turnover three years ago was only £210,000 and scripts 2,000 per month.

With his new broom Mr Y set about building the business up to its true potential. The front shop was the first to get the treatment. Fittings were reorganised, stock was tidied up and put in the right place and the whole shop was made to look both more welcoming and more professional. By ensuring that good stock levels



# and the big bad superstore

appreciate this type of environment, others will not.

Cynics will be tempted to believe that it is in the supermarket's interest to run a slow dispensing service. A waiting patient can fill a trolley with groceries in 20 minutes. In an independent's view, this is bad service, even if it is a good grocery store strategy, but it is good news for the independents if it is true. There are a lot of patients who will either not be conned or simply not put up with such service.

Although closer to the health centre, it proves to be more awkward for patients to get to, particularly those on foot. Between the health centre and the pharmacy there is a car park of huge proportions, which on a busy day is like Oxford Circus in the rush hour. Not a route for either the unsteady or mums with prams. There's a much easier place to get a prescription dispensed, even if it is a mile away.

So, with the odds a little against him, Mr Y is confident that a good little 'un like him can beat a smart-looking but inexperienced big 'un and there's a lot of evidence to support his view. There are many – too many – horror stories telling of the rapid destruction of years of an independent's hard work and goodwill by insensitive new owners who fail to offer anything remotely resembling the service patients are accustomed to.

Mr Y cannot depend on this happening in the new store: the supermarket's pharmacist may be one of the well known exceptions who will offer superb service to patients. He can, however, safely rely on the fact that he, as an independent, can offer an excellent and flexible service for prescription patients and healthcare medicines.

## Recommendations

Ideally, Mr Y would like to communicate with all of Mr X's patients, using Mr X's database. He cannot do this for obvious reasons, but not one of them should be left unaware of Mr Y's pharmacy and the services he offers.

- A new practice leaflet,

should be printed and distributed to every household in his catchment area, remembering that more than half of them currently patronise Mr X.

- Mr Y's current collection and delivery service is operating at a very low level. It should be stepped-up considerably and publicised widely.

- One of Mr X's redundant dispensary assistants has been

**There is an easier place to get a prescription dispensed, even if it is a mile away**

taken on by Mr Y. Her knowledge of her previous employer's patients will be available and patients will be pleased to see a familiar face.

- Mr Y's pharmacy has been geared to pre-prescription and healthcare. Like many wise independents, he has reduced toiletries to a service level, shrunk the front shop and increased the size of the dispensary

and transformed it into an open plan. What's missing is a consultation area and this should be remedied.

- Mr Y should seriously consider enlarging his range of healthcare products. Conventional OTC medicines are a must but there are growing demands for herbal, homeopathic and other remedies and these need catering for.

- Mr Y's biggest need is to get patients of Mr X to know where he is and what he does. Many will never have set foot in his pharmacy, or even know it exists, even though it is their nearest local pharmacy. One hit with a practice leaflet isn't really enough. Regular leaflet drops, local advertising and even support or sponsorship of local events will pay dividends.

## Success in-store

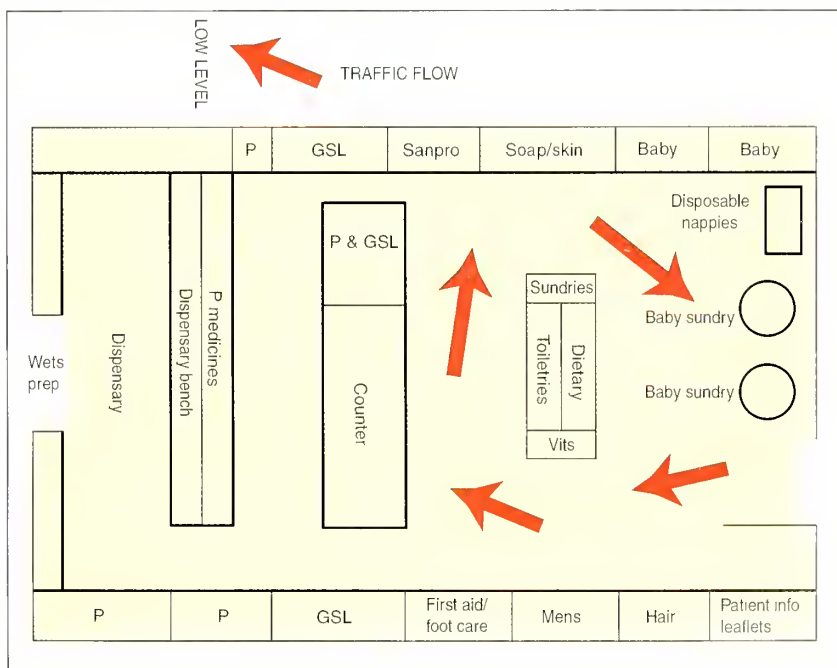
Mr Y has increased his monthly script business from 2,600 to 3,000 in just three years. Without recent events he should look forward to perhaps a steady 5 per cent growth in this area each year if he carries on his good service.

He estimates that Mr X dispensed 5,000 items each month. If both he and Mr Z get their tactics right and the supermarket pharmacy doesn't try too hard, it is believed, or rather hoped, that 2,000 of these can be prised away.

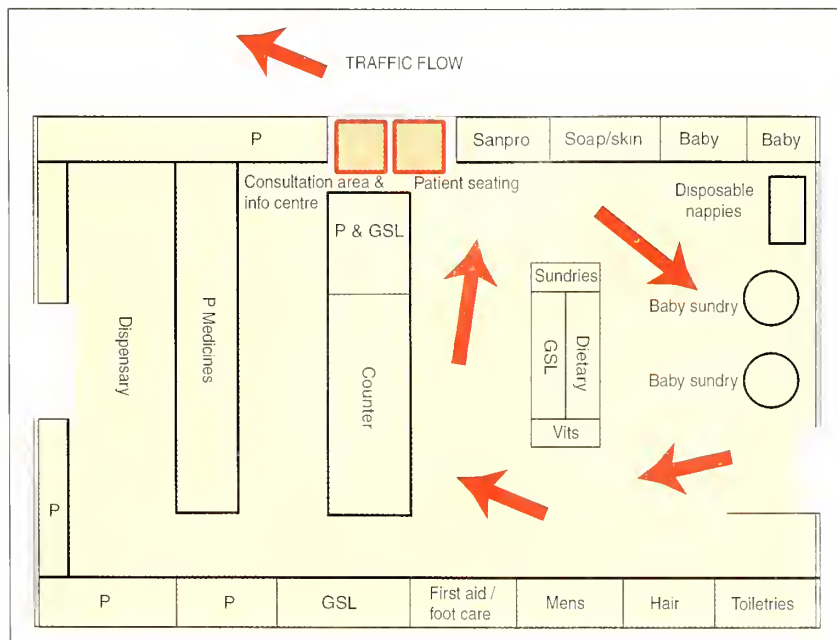
By offering new services and healthcare product ranges and communicating regularly and well there's no reason to doubt that 1,000 or more of these find their way into Mr Y's shop every month.

Mr Y is living proof that with enthusiasm, optimism, hard work, a poorly-placed, run-down pharmacy can be turned around and built into a success – although this will never be a big shop, there just isn't the scope.

Importantly, this situation demonstrates the different attitudes of two independent pharmacists, in very similar situations, faced with the same new opposition. One views it with fear, while the other sees it as an opportunity to be capitalised on and there is a very good chance that he will succeed.



The addition of a consultation area (below) could improve still further Mr Y's layout





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### The New Demonstration Island

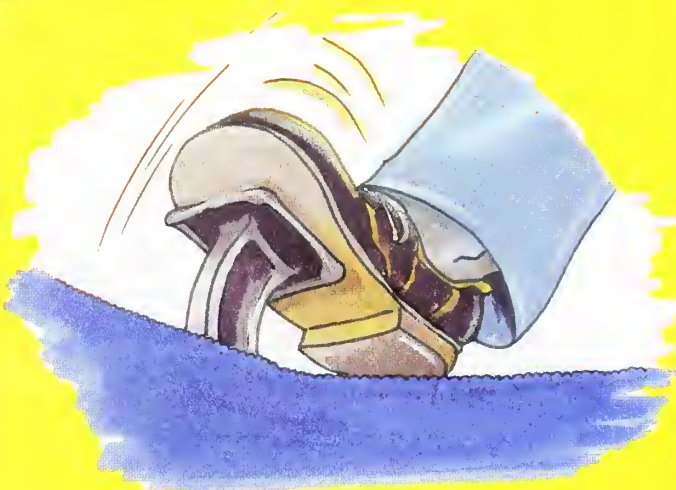
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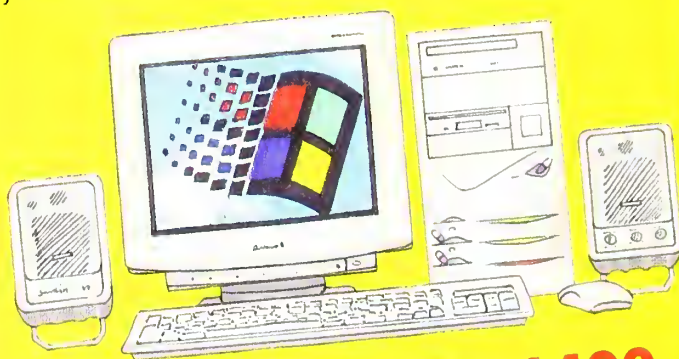
- Security
- Original Pack Dispensing
- Alternative Therapies
- David and Goliath... how to work in harmony in the face of competition from the multiples
- Will IT work?... Computing and its role in the pharmacy
- What's new - and will what's new make profit

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# Management buy-out for Wisdom

The Addis family has sold Wisdom in a management buy-out.

The management team is led by Brian McMullen, who has been managing director and chief executive of Wisdom since 1994. He will have a controlling 51 per cent stake in the new company, which he has bought with three other directors, financed by the investment capital group 3i.

He was unable to disclose the amount paid, only to say that the *Independent* newspaper's figure of "a little under \$15 million" was "badly wrong".

The buy-out team also includes sales and marketing director Janice Collins, manufacturing director Mike Rudge and financial director Julian Edge-Partington. Paul Woddis, a former managing director of Cus-



Left to right: Frank Carter, KPMG Corporate Finance; Robin Addis, director of Addis; Bill Purver, chairman of Addis; Brian McMullen; Helen Steel, Coopers & Lybrand; and Robin Collet, finance director, Addis

sons UK and chief executive of Sanofi UK, is acting as non-executive chairman.

The Addis Toothbrush Co was formed over 200 years ago. The Wisdom brand was established

just after the Second World War and the Wisdom Regular is currently the UK's best-selling toothbrush. The company has over 190 employees.

Mr McMullen comments: "Wisdom's heritage and name is a key reason for the brand's continued strength. With further growth in the toothbrush market forecasted, the chance for a management team to buy Wisdom from its founders, Addis, presented an exceptional investment opportunity."

Current marketing initiatives, including the introduction of regular triple packs and the Instant Win Scratch Card promotion, aim to encourage people to change their toothbrush every three months rather than the average of once every nine months.

## Gehe acquisition was good for AAH figures

AAH has seen major improvements in performance since its acquisition by Gehe in May, 1995.

Operating profits for the nine months to December 31, 1995, were almost the same as for the preceding 12 months (\$32.9 million compared with \$34.6m). Turnover at \$1.3 billion was 10 per cent higher than the same nine-month period in 1994. Return on sales was 2.47 per cent.

Pharmaceutical wholesaling and retail businesses (Hills pharmacies) increased their operating profits by 18.8 per cent to \$22.7m and 31.2 per cent to \$8.9m respectively in the nine months to December 31, 1995, compared with the same period the previous year (accounting dates have been changed from March to December to bring AAH in line with Gehe).

David Taylor, the wholesale division's managing director,

says a significant amount of business was taken from Unichem. Gehe has contributed to increased efficiency by its expertise in automation and improving warehouse layout. Further rationalisation of the 16 branches is expected, but, he says: "It is easy to close branches but not easy to retain business." So careful planning will be necessary. Some \$10m has been set aside for this.

The wholesale division's turnover increased 14.2 per cent to \$1,430.5m in 1995, compared with the 8.5 per cent increase in the overall UK market and the 4.3 per cent shown by Unichem.

Michael Major, managing director of the retail chain Hills, attributes improvements to organic growth, as well as to acquisitions. There are now over 300 Hills pharmacies. Changes in management information systems and financial control have

improved performance of retail and wholesale businesses.

AAH is still committed to acquiring the Lloyds' chain, but not "determined at any cost", he says. Group finance director Stefan Meister envisages that the same profit success could be achieved, although Lloyds would be a much more difficult company to integrate with Gehe than AAH. Some immediate savings could be achieved, he thought.

● Hills' pharmacies have just started a pilot trial of a disease management programme involving patients with diabetes.

● Gehe has sold Schering a 75 per cent stake in Jenapharm, eastern Germany's most profitable pharmaceuticals group. The deal will strengthen Schering's hormone division, particularly fertility control. Gehe's motive is to focus on its core business of wholesaling.

## Scholl director resigns over appointment of chairman

Scholl director Tom Long has resigned following the arrival of new chairman Stuart Wallis. The terms of his appointment were not acceptable to Mr Long.

Mr Wallis will receive a non-pensionable salary of \$100,000, and a further performance-linked payment of up to \$1 million.

It is believed Mr Wallis was appointed because shareholders were impressed by his role at Fisons in its hostile takeover by Rhone-Poulenc Rorer last year.

## Tab to float on London Exchange

Therapeutic Antibodies plans to seek a full listing on the London Stock Exchange by raising \$30 million through an institutional placing of shares. This will put the value of the group at \$150m.

Tab is a biotechnology group specialising in sheep-generated polyclonal antibodies for use against snake venom, drug overdose and sepsis syndrome. Last year, it launched two anti-venoms and is currently undertaking phase II trials on a product for the treatment of sepsis.

Since its formation in the UK in 1984, Tab has already raised \$45m through a series of private placements in the US. Although its head office is now in the States, its main R&D facilities are based at St Bart's Hospital in London, with production sites in Wales and Australia.

## Cortecs raises £46m in share placing

Cortecs International has raised \$46 million following a share placing which was announced on May 24.

A "substantial international response" meant that the placing was increased from that which had been previously announced, but, even so, the expanded placement was more than twice oversubscribed. Some 12.5 million shares were placed at 365p per share.

The capital raised will be used in four main areas:

- to complete US trials of an oral delivery system for calcitonin for use in the treatment of osteoporosis
- taking two further proteins into human studies with the company's oral peptide delivery systems
- extending phase II trials for an oral vaccine against *Pseudomonas aeruginosa* into Europe

this year (the organism is responsible for the majority of deaths in cystic fibrosis)

● developing opportunities in doctor's surgery diagnostics and oral drug delivery systems.

As a result of increased investment in the near-term, Cortecs' end of year target to break even will now be deferred by 12 to 18 months, according to the company's executive chairman Glen Travers.



# DoH sidesteps generic issues

**The situation is rapidly approaching where 50 per cent of prescriptions are being filled generically at less than 20 per cent of the cost of branded equivalents**

Health secretary Stephen Dorrell has given little encouragement to generic manufacturers that their concerns over the delayed introduction of mandatory patient pack dispensing and erosion of their competitive edge in European markets will be addressed in the near future.

There was an understanding that patient packs could be introduced into the NHS at nil cost, he told the British Generic Manufacturers Association last Tuesday. "We now need to clarify how that can be delivered in practice," said Mr Dorrell.

"In considering how fast we go, I have to assess the risks of extra costs in the proposals that have been made to me. Only when I am satisfied we can deliver the no-cost commitment can the Government proceed."

Nor would he reveal the Government position over the competition concerns facing generic



Stephen Dorrell (left) with the BGMA's Andrew Kaye

manufacturers in Europe. Countries outside the European Community allow generic manufacturers to develop products during the patent period for release as soon as the patent expires.

Such development work is not permitted in Europe. The result, said BGMA chairman Andrew Kaye, is that there is still generic competition the day after the patent expires, but the products come from Canada, the US, Iceland, India, China – almost anywhere but Europe.

The differences in legislation between different countries distort the market and can have damaging effects on the industry and governments' legitimate

efforts to manage their health budgets, argued Mr Kaye.

He welcomed recent efforts in the Uruguay GATT world trade talks to encourage a more uniform application of patent law internationally. The Community's SPC regulation was a "flawed attempt" to harmonise the period of market exclusivity for proprietary medicines within the European Union.

He noted that the European Parliament had voted in favour of allowing generic manufacturers to begin development work necessary for product registration during the period of patent protection – the so-called Roche-Bolar provision in the US.

"We simply want to be able to compete equally with non-European generic manufacturers," said Mr Kaye.

It is time the Department of Health took action to make patient pack dispensing mandatory. "The DoH committed itself to the necessary changes in terms and conditions of service

to ensure that the change to unbroken patient pack dispensing would actually happen," said Mr Kaye.

"Generic manufacturers are taking considerable commercial risks on the basis of the Department's announcements. Without the promised changes, we shall lose significant amounts of money."

Manufacturers have invested over \$10 million in plant to make the change from bulk to patient packs, but they would be unwise to purchase more new equipment while any uncertainty remains, he said.

Mr Dorrell predicted a 75 per cent growth in the generic market over the next decade, but cautioned that the DoH needed to recognise the legitimate concerns of generics manufacturers, as well as the branded sector.

He encouraged the two groups to reach a common agreement on how to proceed in Europe. The interests of generics companies were just as important as those of the R&D-based industry, he assured the BGMA.

Mr Dorrell said there is a commitment by both industry and the Department to move in the direction of patient packs on the basis that it could be introduced into the NHS at nil cost.

## AESGP to open in London

The AESGP is to open a London Docklands satellite branch next month to strengthen links with the European Medicines Evaluation Association, which also has its offices at Canary Wharf.

Fernand Sauer, the EMEA's executive director, welcomes the move, which will allow greater contact with the Association. "EMEA has a solid partnership with you," he told delegates at the AESGP's annual conference.

### COMING EVENTS

#### TUESDAY, JUNE 11

##### Bristol & District Branch, RPSGB

Grace Room of the Gloucestershire County Cricket Ground, Nevil Road, Bishopston, Bristol, 7.15 for 7.30pm. Buffet 8.45pm. Please note: replies for the river cruise on July 4 are wanted by June 15.

#### WEDNESDAY, JUNE 12

##### Wirral Branch, RPSGB

Visit to AAH Pharmaceuticals warehouse.

## LIG reports 72pc rise in profits

Halfway through its three-year restructuring programme and the London International Group is already reaping the benefits, with a 72 per cent rise in pre-tax profit for the year to March 31.

Pre-tax profits rose from \$15.2 million in 1995 to \$26.2m, which included exceptional charges of \$2.8m. Sales were up 11 per cent to \$309.6m and earnings per share now stand at 5.76p, a rise of over 43 per cent.

The Group's condom sector reached sales of \$117m last year, a 15.2 per cent rise, which was fuelled by significant marketing investment – Durex became MTV's first global sponsor last year. Consumer sales grew by 11 per cent in the UK, but strongest performances were seen in southern Europe and North America. LIG now has a 22 per cent global market share of branded condoms.

Avanti, LIG's polyurethane condom, which had a limited launch in the US pending clinical

trials for FDA approval, retained its 3 per cent value share last year.

Surgical gloves grew by 17.7 per cent to \$59.4m, benefiting from hospitals switching to powder-free products. Sales were up 17.4 per cent in the UK and Europe (strongest in Germany and Sweden) and 16.7 per cent in the US. Household and industrial gloves reached \$45.4m, a rise of almost 9 per cent.

In line with its strategy to strengthen its core thin film barrier technology, LIG acquired the Mister condom business in Malaysia for \$2m; Androtex condoms in Spain for \$6.7m; and Aladan, one of the largest manufacturers of examination gloves and condoms in the US, for \$46m.

The disposal of the Group's non-core brands included the sale of the Plantur hair care brand in Germany; feminine hygiene brands in the US; and the sale of the Woodward's UK and export businesses.

## Pharmoney services now centralised

NPA Pharmoney has now streamlined its financial services for National Pharmaceutical Association members by appointing a single supplier.

NWS Bank is now co-ordinating the provision of all personal loans, personal contract purchases, asset finance for cars, lease purchases and conditional sale agreements from one central point. Interest rates start from 9.9 per cent APR.

A team of experts at NWS offers a specialist consultation service on Freefone 0800 269416. NPA members can receive free advice on the appropriate financing arrangements to suit their own circumstances.

The deal has been negotiated by Jardine Group Services, which operates NPA Pharmoney and has worked with NWS for nearly eight years.



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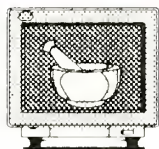
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(\*source Martin Hamblin Pharmacist Readership Survey)

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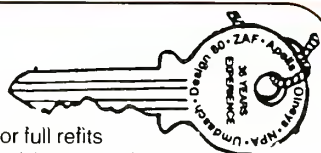
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# ABOUT people

## RPSGB hands out honours to eight new fellows

Eight pharmacists have been designated as Fellows of the Royal Pharmaceutical Society following this month's Council meeting.

*For distinction in the profession of pharmacy:*

● Barry Andrews, managing director of Moss and retail director of Unichem. A member of the Pharmaceutical Services Negotiating Committee and the Standing Pharmaceutical Advisory Committee

● Noel Bamber, a community pharmacist, secretary of Lincs LPC and also a PSNC member

● David Newton, a community pharmacist and secretary and treasurer of Humberside LPC. Also treasurer and public relation officer of the Hull branch of the Society

● John Hill, a Canadian community pharmacist and consultant on drug use management.

*For distinction in the practice of pharmacy:*

● Paul Clark, a community pharmacist and secretary to St Helens & Knowsley LPC, and a non-executive member of the FIIA

● Kenneth Gallagher, a community pharmacist, now retired, but a past-chairman of Lambeth, Southwark & Lewisham LPC.

*For distinction in the practice and profession of pharmacy:*

● Ronald Purkiss, chief pharmacist at the Northern General Hospital in Sheffield, and a lecturer and examiner at Bradford University. Also chairman of the Sheffield branch of the Society.

*For distinction in the science of pharmacy:*

● Roger Waigh, professor of medicinal chemistry at the University of Strathclyde's department of pharmaceutical sciences, and Science chairman for BPC 1996.



A day out watching the cricket was a recent treat for customers of Unichem's Hinckley and Swansea branches. Pictured with the Hinckley and Swansea general managers, Steve Vincent and Geoff Mellor, are some of their guests, who watched Worcestershire and Glamorgan play at the Abergavenny cricket ground last month

## CPP gains 11 new members

The College of Pharmacy Practice has 11 new full members.

The following have successfully completed the requirements for the College's membership examination:

Fiona Bruce; Elaine Chow; Sharon Conroy; Jayne Delahaye; Gillian Gow; Gillian Hawksworth; Stuart Lakin; Bhasker

Pandya; Helen Rigby; John Sexton; and Natalie Soulsby.

Assessment D (practice reports and oral presentation) has been passed by the following: Barend Anthon; Elaine Chow; Sharon Conroy; Nickos Efthymiou; Stuart Lakin; Maksim Matadar; Bhasker Pandya; and Elizabeth Warren.

Customers at the Co-op Health Care pharmacy in Biddulph, Staffordshire, are benefiting from the skills of two award winners.

Pharmacy assistant Jackie Brindley has won the group's customer charter award for customer service; and her

boss, pharmacist Steve Farrell, won the manager of the year award. His prize has earned a night out at a local restaurant for all the staff. Left to right are: retail operations manager John Nuttall, customer service manager designate Linda Perry, Mr Farrell and Ms Brindley



Pharmacist Manish Solanki's plans worked out just right when he won £600 in travel vouchers in a Nurofen planogram competition. Mr Solanki of the Arundel Pharmacy, Benfleet, Essex, completed a planogram of an analgesics fixture and answered three questions successfully to win the first prize. Ten runners-up won £25 gift vouchers. Pictured with Mr Solanki (centre) are Crookes Healthcare's regional business manager, Mark Sidey (left), and territory manager Stephen Stearns

## APPOINTMENTS

Jeffrey Boily has been appointed managing director of Scotia Pharmaceuticals, the commercial arm of Scotia Holdings, of which he has been elected an executive director.

Alan Swindells has joined the pharmaceutical market research company Context Research International.

Mediphase has appointed Ahmed Saley and Tim Dunn as joint managing directors to succeed Maurice Leaman, who will be leaving his position this month.

The annual general meeting of the Shop and Display Equipment Association (SDEA) saw Richard Armitage elected president for the 21st year in

succession. Malcolm Woolff was re-elected as vice president. Richard Bayliss of Exporama Systems was elected to the executive council for the first time. Nick Flack of Quinton & Kaines and Noel Greenwood of GWD were all re-elected.

Gary Prior has been made managing director of the Philips Domestic Appliances and Personal Care Division, with effect from July 1, when the current managing director, Denis McGiffen, leaves the company.

Weider Nutrition, part of the US Weider Nutrition Group, has appointed Paul Geoghegan as the company's new managing director.



*The 1996 NPA Challenge Cup, organised in conjunction with Pharmacy Today and Chemist & Druggist, will take place at the Aldenham Golf and Country Club, just off the M25/M1, on Tuesday, June 11th.*

# The 1996 NPA Challenge Cup



**J**oin us for a great day's golf at the Aldenham Golf and Country Club and play the challenging course in the company of other pharmacists. Tournament play will be for the prestigious 'NPA Challenge Cup' together with other competitions and individual prizes.

Open to all golfers, our annual golf day on June 11th is fast approaching. Places are limited, so anyone who has not registered their interest in playing should do so by returning the form below as soon as possible.



The full day's golf and hospitality will start when players arrive and enjoy coffee and biscuits and pick up their score cards, before teeing off for the morning team competition over 9 holes.

Following lunch the individual competition will begin. This Stableford rules competition will be played over 18 holes and incorporates integral competitions, plus other individual prizes.

After the day's golf, players will be able to relax over a drink before the evening three course dinner, speeches and prize giving ceremony, where the overall winner will claim the handsome 'NPA Challenge Cup'.



**Fee for the full day's activities is £68 including VAT.**

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on: 0181 288 0833.**

☐ Please send me \_\_\_\_\_ (no of persons) tickets for the 1996 NPA Challenge Cup

☐ I enclose a cheque for \_\_\_\_\_ made payable to Richard Langrish Associates

Name \_\_\_\_\_

Pharmacy Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No: \_\_\_\_\_

Handicap \_\_\_\_\_



NEW  
CLINICALLY PRO

# TOEPEDO SINKS ATHLETE'S FOOT

**Toepedo** CREAM<sup>TM</sup>

DUAL-ACTION TREATMENT FOR ATHLETE'S FOOT

FOR EXTERNAL USE ONLY PL 0173/0020 P

benzoic acid, salicylic acid

On target for another Pharmacy Only blockbuster, new TOEPEDO cream for Athlete's Foot has been launched by the team who brought you the sure-fire winners, Ibuleve<sup>TM</sup>, Otex<sup>TM</sup> and Bazuka<sup>TM</sup>. Dual-action TOEPEDO will be fuelled nationwide by an explosive combination of TV, radio and press advertising.

We will be making waves in the Athlete's Foot market. Make sure you don't miss out - load up with stock now!

## RELIEVES ITCHING AND DISCOMFORT FAST

TOEPEDO Registered Trademark and Product Licence held by Diomed Developments Limited, Hitchin, SG4 7OR, UK. Distributed by DDD Limited, 94 Rickmansworth Road, Watford, Herts, WD1 7JJ, UK. **Active Ingredients:** 6.0% w/w benzoic acid BP, 3.0% w/w salicylic acid BP. **Directions:** Apply a thin layer to the affected areas and massage gently until absorbed. Apply twice daily until symptoms clear. **Indications:** For the treatment and management of Athlete's Foot and other appropriate fungal skin infections. **Precautions:** Do not use to treat thrush, and keep away from the face, bottom and genital (sex) regions. Do not use on moles, rashes or any skin lesion for which TOEPEDO is not recommended. Do not use if sensitive to any of the ingredients. Keep all medicines out of the reach of children. **FOR EXTERNAL USE ONLY**. **Legal category:** P. **Packing:** Tubes of 20 g (PL 0173/0020), price £3.95 (£3.36 exc VAT). 3/96.

\*Contact your Dendron representative or wholesaler. Dendron tel. no: 01923 229251.

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